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(Requestor's Name)

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(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

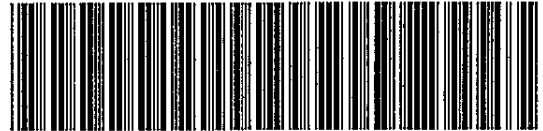
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ALLAHASSEE FLORIDA  
STATE

156 1/27/04

**TRANSMITTAL LETTER**

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**FILED**  
2004 JAN 20 PM 12:24  
DEPARTMENT OF STATE  
TALLAHASSEE FLORIDA

**SUBJECT:** NATURAL ESCAPE, INC.  
(PROPOSED CORPORATE NAME - **MUST INCLUDE SUFFIX**)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status  
**ADDITIONAL COPY REQUIRED**

**FROM:** SHULI FISHBAUM  
Name (Printed or typed)

3900 GALT OCEAN DRIVE #1702  
Address

FORT LAUDERDALE, FLORIDA 33308  
City, State & Zip

954 563-2100  
Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

### **ARTICLE I NAME**

The name of the corporation shall be:

NATURAL ESCAPE, INC.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

3900 GALT OCEAN DRIVE # 1702,  
FORT LAUDERDALE, FLORIDA 33308

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

INTERIOR DESIGN

### **ARTICLE IV SHARES**

The number of shares of stock is:

1000 SHARES

### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

SHULI FISHBAUM, PRES/SEC/TRESURER  
3900 GALT OCEAN DRIVE #1702  
FORT LAUDERDALE, FLORIDA 33308

### **ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

SHULI FISHBAUM  
3900 GALT OCEAN DRIVE # 1702  
FORT LAUDERDALE, FLORIDA 33308

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

SHULI FISHBAUM  
3900 GALT OCEAN DRIVE # 1702  
FORT LAUDERDALE, FLORIDA 33308

\*\*\*\*\*

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Shuli Fishbaum  
Signature/Registered Agent

1-15-04  
Date

Shuli Fishbaum  
Signature/Incorporator

1-15-04  
Date

FILED  
2004 JAN 20 PM 12:24  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA