### 900030867599

D4 MAR 22 PH I2: 1 Secret and at stat

# P0400053371

| (Requestor's Name)                      |  |  |  |  |
|---|--|--|--|--|
|   |  |  |  |  |
| (Address)                               |  |  |  |  |
|   |  |  |  |  |
| (Address)                               |  |  |  |  |
|   |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |
|   |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |
|   |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |
|   |  |  |  |  |
| (Document Number)                       |  |  |  |  |
|   |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |
|   |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |
| Special management to 1 ming emocr.     |  |  |  |  |
|   |  |  |  |  |
| į.                                      |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |

Office Use Only

10 3/39

### TRANSMITTAL LETTER

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

**»** ‡

| SUBJECT: Tigh           | ten Up, Inc.                     |                            |                  |  |  |
|-------------------------|----------------------------------|----------------------------|------------------|--|--|
|                         | (PROPOSED CORPORA                | TE NAME – MUSTINGU         | UDJASUJAK)       |  |  |
|                         |                                  |                            |                  |  |  |
|                         |                                  |                            |                  |  |  |
|                         |                                  | . فر فم په                 |                  |  |  |
| Enclosed are an orig    | inal and one (1) copy of the art | icles of incorporation and | a check for:     |  |  |
| □ \$70.00               | <b>☑</b> \$78.75                 | \$78.75                    | \$87.50          |  |  |
| Filing Fee              | Filing Fee                       | Filing Fee                 | Filing Fee,      |  |  |
|                         | & Certificate of Status          | & Certified Copy           | Certified Copy   |  |  |
|                         |                                  | Т от от таке обру          | & Certificate of |  |  |
|                         |                                  |                            | Status           |  |  |
|                         |                                  | ADDITIONAL CO              |                  |  |  |
|                         |                                  | ADDITIONAL                 | T REQUIRED       |  |  |
| EDOM. Jo                | oshua Nino                       |                            |                  |  |  |
| Name (Printed or typed) |                                  |                            |                  |  |  |
|                         |                                  |                            |                  |  |  |
| 532 Anapolis Street     |                                  |                            |                  |  |  |
| Address                 |                                  |                            |                  |  |  |
|                         |                                  |                            |                  |  |  |
|                         | Deltona, FL 32725                |                            |                  |  |  |
| •                       | City, State & Zip                |                            |                  |  |  |
| 386-848-5211            |                                  |                            |                  |  |  |
|                         |                                  |                            |                  |  |  |
|                         | 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 this corporation shall be: Tighten Up, Inc.

## FILED 04 MAR 22 PM 12: 12 SECKE PART OF STATE TALLAHASSEE, FLORIDA

### Article II Principle Office

The principle place of business and mailing address is: 532 Anapolis Dr.,
Deltona, Fl 32725

### Article III Purpose

The purpose for which the corporation is organized is: Tighten Up, Inc. is created for the purpose of establishing a retail store supplying goods and services to the public. Items included in initial inventory will include accessories, clothing, shoes, books, and music, etc.

### Article IV Shares

The initial shares of stock is: 4 (four).

### Article V Initial Directors

The names, addresses and titles of initial officers are:
Joshua Nino, President, 532 Anapolis Dr., Deltona, FL 32725
Warren Jackson, Secretary, 115 Baywood Dr., Daytona Beach, Fl 32117
Cadalia Ezell Director, 410 School St., Daytona Beach, Fl 32114
Peter Jackson, Director, 115 Baywood Dr., Daytona Beach, Fl 32117

### Article VI Registered Agent

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

532 Anapolis Street Deltona, FL 32725

### Article VII Incorporator

The name and address of the Incorporator is: Joshua Nino
532 Anapolis Street
Deltona, FL 32725

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.

| Asil Niuc                     | March 19,2004 |
|-------------------------------|---------------|
| Signature of Registered Agent | Date          |
| Ash divo                      | March 192004  |
| Signature of Incorporator     | Date          |