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TRANSMITTAL LETTER

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

SUBJECT: Eye	Pizazz Inc		
	(PROPOSED CORPORA	VTE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
☐ \$70.00 Filing Fee	\$78.75 Filing Fee	\$78.75 Filing Fee	2 \$87.50 • Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of Status
		ADDITIONAL CO	
FROM: _R	ick Bennett		
	Nam	e (Printed or typed)	
	4000 N. W. 108th. Drive		
		Address	
	, ,	3065	
	City	y, State & Zip	· · · · · · · · · · · · · · · · · · ·
	(954) 341-8444		
	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:

Eye Pizazz Inc.

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ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 4000 N. W. 108th. Dr.

Coral Springs, FL. 33065

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Retail sales

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V __INITIAL OFFICERS AND/OR DIRECTORS

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

Rick A. Bennett 4000 N. W. 108th. Dr. Coral Springs, FL 33065 — President Kathleen M. Bennett 4000 N. W. 108th. Dr. Coral Springs, FL 33065 — Secretary

ARTICLE VI REGISTERED AGENT

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

Kathleen M. Bennett 4000 N. W. 108th. Dr. Coral Springs, FL 33065

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Rick A. Bennett 4000 N. W. 108th. Dr. Coral Springs, FL 33065

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

Signature/Registered Agent

Date

4-10-04

Date

Signature/Incorporator

Date