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TRANSMITTAL LETTER

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

SUBJECT: In Dreams, 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 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM: Susan M. Cumpings Name (Printed or typed)				
4058 Foss Road Address				
Lake Worth, FL 33461 City, State & Zip				
(561) 963 - 4009 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)

NAME ARTICLE I

The name of the corporation shall be:

Dreams, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4058 Foss Road

Lake Worth, FL 33461

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

Profit Sales

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Susan M. Cummings, President

4058 Foss Road

Lake Worth, FL 33461

REGISTERED AGENT

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

Susan M. Cummings 4058 Foss Road

Lake Worth, FL 33461

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Susan M. Cummings

4058 Foss Road

Lake Worth, FL 33461

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

Signature/Incorporator