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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
JUN 21 PM 4:10

OB 6/22

DATE June 17, 2004

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


Re: Artistic Inspirations, , Inc.
(Name of Corporation)

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$78.75

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.


Melissa Alcantaro
(Individual's Name)

Artistic Inspirations, Inc.
(Name of Corporation)

MAILING ADDRESS OF CORPORATION	
3647 SouthWest Ballweg Street	
Port St. Lucie, Florida 34953	
PHONE	
(772)	240-4045

ARTICLES OF INCORPORATION

of

Artistic Inspirations, Inc.
(name of corporation)

SECRETARY OF STATE
DIVISION OF CORPORATIONS
JUN 21 PM 4:10

The undersigned acting as the incorporator(s) of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

ARTICLE I - CORPORATE NAME

The name of the corporation is:

Artistic Inspirations, Inc.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue 500 shares of common stock, par value \$ 1.00 per share.

ARTICLE V - INITIAL PRINCIPAL OFFICE

The street address of the initial principal office and, if different, the mailing address is:

STREET ADDRESS	3647 South West Ballweg Street		
CITY	Port St. Lucie	FLORIDA	ZIP 34953

Mailing address, if different

STREET ADDRESS	Same as above		
CITY		FLORIDA	ZIP

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME	William E. Graves		
ADDRESS	2405 24th Lane		
CITY	Lake Worth	FLORIDA	ZIP 33463

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have One (1) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:


NAME	Melissa Alcantaro		
ADDRESS	3647 South West Ballweg Street		
CITY	Port St. Lucie	STATE Florida	ZIP 34953
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP

ARTICLE VIII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	Melissa Alcantaro		
ADDRESS	3647 South West Ballweg Street		
CITY	Port St. Lucie	STATE Florida	ZIP 34953
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP

The undersigned incorporator(s) have executed these Articles of Incorporation this 17th day of June, ~~19~~ 2004.

 (Signature)
 Melissa Alcantaro
 _____ (Signature)
 _____ (Signature)

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/ REGISTERED OFFICE

SECRET FILED
CIVIL SERVICE DIVISION
04 JUN 21 PM 4:18

Artistic Inspirations, Inc.
(name of corporation)

Pursuant to Florida Statutes Section 8.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 3647 South West Ballweg Street
Port. St. Lucie, Florida 34953

has named William E. Graves

located at the aforesaid address, as its registered agent to accept service of process within this state.

2405 24th Lane
Lake Worth, Florida 33463

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in his certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


William E. Graves
(Signature)

June 17, 2004
(Date)