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ND 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)

Artisti c Inspirations, Inc.
(Name of Corporation)

MAILI	ng address of corporation —
3647	SouthWest Ballweg Street
Port	St. Lucie, Florida 34953
(772)_	PHONE

r	\cdot	TICLES OF INCORPORATION	511.5
		of	DIVISIONE STATE
	Artistic	Inspirations, Inc.	- Alexander
		(name of corporation)	1 Pil L: 12
The undersigned act the following articles of in		to s of a corporation under the Florida Business h corporation:	Corporation Act, adopt()
			· · · · · · · · · · · · · · · · · · ·
		ARTICLE I - CORPORATE NAME	٠,
The name of the cor	poration is:		
	Art	tistic Inspirations) Inc.	
			, , , , , , , , , , , , , , , , , , ,
		ARTICLE II - DURATION	
mate at a			
This corporation sha	ill exist perpetually	unless dissolved according to Florida law.	
		•	
		ARTICLE III - PURPOSE	•
		rpore of engaging in any activities or business p	ermitted under the laws of the
United States and the State	te of Florida.		•
		<i>(</i>	· ·
	£.,	A RTICLE IV - CAPITAL STOCK	
The corporation is a	authorized to issue _	500 shares of common stock, par value	<u>1.00</u> per si are.
			, , , , , , , , , , , , , , , , , , ,
	AR'	TICLE V - INITIAL PRINCIPAL OFFICE	
The street address o	f the initial principa	l office and, if different, the mailing address is:	
STREET ADDRESS			
	3547 South	West Ballweg Street	
CYMY!	<u> </u>		不是不是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个
CITY Port St.		FLORIDA	ZIP 34953
Mailing address, i	f different		
STREE! ADDRESS	And the second of	the second state of the se	The second secon
	Same as abo	ve	n in the same of t
CITY		- FLORIDA	ZIP

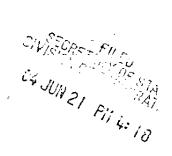
ARTICLE VI - Il ITIAL REGISTERED OFFICE AND AGENT

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

NAME	William E. Graves	and the second s	and the second s
ADDRESS	2405 24th Lane	· · · · · · · · · · · · · · · · · · ·	Company of the company of the company of
CITY	Lake Worth	FLORIDA	ZIP 33463

NAME			
	Melissa Alcantaro		4.400
ADDRESS	3647 South West Ball	weg Street	
CITY	Port St. Lucie	STATE Florida	ZIP 34953
NAME			
ADDRESS		na menena dikenggan kalanda di kedisa dikengan kangan dikengan kangan kangan di Kalanda. Kangan di Kalanda di	
CITY	<u> </u>	STATE	ZIP
NAME			1.00.00
ADDRESS	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	- 12 · 12 · 12 · 12 · 12 · 12 · 12 · 12
CITY	e entered the entered to the entered	STATE	ZIP
		<u>llweq Street</u>	
NAME ADDRESS	Melissa Alcantaro	Alamania III alkan wata waliotaa ilawana wa	±3±% € .
		11weg Street	
CITY Port	St. Luicie	11weg Street STATE Florida	ZIP 34953
CITY Port		CITTA CONT.	ZIP 34953
1010		CITTA CONT.	ZIP 34953
NAME		CITTA CONT.	ZIP 34953 ZIP
NAME ADDRESS		STATE Florida	
NAME ADDRESS CITY		STATE Florida	

· CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE



	Artistic Inspirations, Inc. (name of corporation)	
	traine of corporation)	
_		
Pursuant to F	Florida Statutes Section 8.091 and 607.0501, the following is	submitted:
The above co	orporation, organized under the laws of the State of Florida with	h its registered office
as indicated i	in the Articles of Incorporation	•
at	3647 South West Ballweg Street	
	Port. St. Lucie, Florida 34953	T
has named _	William E. Graves	
located at the	e aforesaid address, as its registered agent to accept service of I	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 cal acity. 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	
William E. GRaves	June 17, 2004
(Signature)	(Date)