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TRANSMITTAL LETTER

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

SUBJECT:	InSpirit Giffs (PROPOSED CORPORA)	, Inc. TENAME-MUST INCLU	DE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the artic	eles of incorporation and a	a check for:	
	Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL COR	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	Sally M. S Name (4200 Sum	Saffer Printed or typed) Mer Landin Iddress		2
		Fl 33810 State & Zip 4696 elephone number		of JUL 26

NOTE: Please provide the original and one copy of the articles.

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME	and the second s
The name of the corporation shall be:	
InSpirit Gifts, Inc.	
ARTICLE II PRINCIPAL OFFICE	. <u></u> -
The principal place of business/mailing address is:	7
1200 Summer Landing Drive - Sinte 20: Lakeland, 7L 33810	
ARTICLE III PURPOSE	• • • • • • • • • • • • • • • • • • •
The purpose for which the corporation is organized is:	-1 nature and to
To create and acquire gitts of a spiritua	1 a Children's Fund
The purpose for which the corporation is organized is: To create and acquire gifts of a spiritue Sell Them-A portion of the profits will fun Focused on helping children	a a amoral i who
ARTICLE IV SHARES	
The number of shares of stock is:	Į
100	- denti
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Directors will be selected by Sally M. Salknowledge, experience, and insight release business purpose.	Preside
List name(s), address(es) and specific title(s):	ffer Tchosen for their
buryladae concaring and inside relea	ant to the stated
business purpose.	
municas prochase.	
	TINC 40
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registere	
Sally in Saffer	a agent is.
1200 Summer Landing Dr 202	≥ 334
Landland, F1 33810	5 55
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	· · · · · · · · · · · · · · · · · · ·
Sally M Saffer 4200 Summer Landing Dr 202	
Lakeland, Fl 33810	********
Having been named as registered agent to accept service of process for the above stated corpora certificate, I am familiar with and accept the appointment as registered agent and agree to act in the	
S-10 20 5 11 1 9-11 10 8.00	7-23-4
Signature/Registered Agent Sally M. Saffer	$\frac{7-23-4}{\text{Date}}$
	Date
Sally M. Saffer Sally M. Saffer	4-23-4
Signature/Incorporator	Date