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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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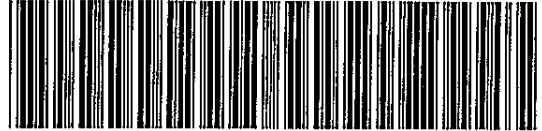
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10-19-04  
10/19/04

## TRANSMITTAL LETTER

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

SUBJECT: Julie Mondell Designs, 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  
☐ \$87.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status  
**ADDITIONAL COPY REQUIRED**

FROM: Julie Mondell  
Name (Printed or typed)

4570 Portofino way # 305  
Address

West Palm Beach, FL 33409  
City, State & Zip

561-255-0118  
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: Julie Mondell Designs, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 4570 Portofino way #305  
West Palm Beach, Fl 33409

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Draft Tech

## 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): Julie M. Mondell, President

## ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

4570 Portofino way #305  
West Palm Beach, Fl 33409

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Julie Mondell  
4570 Portofino way #305  
West Palm Beach, Fl 33409

\*\*\*\*\*

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

Julie Mondell  
Signature/Registered Agent

10-10-04  
Date

Julie Mondell  
Signature/Incorporator

10-10-04  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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