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FLORIDA STATE
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10/27/04
ggf

TRANSMITTAL LETTER

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

2004 OCT 27 AM 11:26

STATE OF FLORIDA
TALLAHASSEE FLORIDA

SUBJECT: Julie Valdez, Inc.
~~(PROPOSED CORPORATE NAME - FAS 10000000000)~~

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 \$78.75
Filing Fee Filing Fee
& Certificate of Status

\$78.75 \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
& Certificate of & Certificate of
Status Status

ADDITIONAL COPY REQUIRED

FROM: Robert Lyons

Name (Printed or typed)

2901 W. Busch Blvd #500

Address

Tampa, Fla. 33618

City, State & Zip

813-230-4208

Daytime Telephone number

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE 1 NAME

The name of the corporation shall be:
JULIE VALDEZ, INC.

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FLORIDA STATE
TALLAHASSEE FLORIDA

ARTICLE 11 PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
22376 STILLWOOD DR.
LAND O' LAKES, FL. 34639

ARTICLE 111 SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
50 Shares of common stock @ \$ 10.00 per share

ARTICLE 1V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address:
Robert Lyons
2901 W. BUSCH BLVD.
SUITE # 500
Tampa, FL. 33618

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of incorporation are:
JULIE A. VALDEZ
22376 STILLWOOD DR.
LAND O' LAKES, FL. 34639



Signature/Incorporator

10-21-04
Date

(An additional article must be added if an affective date is requested)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this 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 status 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


Signature/Registered Agent

10-21-04
Date