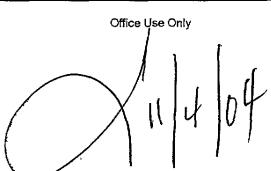


| (R€ | equestor's Name) | | | |
|---|----------------------|----------------|--|--|
| (Ac | ldress) | | | |
| (Ac | idress) | | | |
| (Ci | ty/State/Zip/Phone # | /) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | ısiness Entity Name |) | | |
| (Do | ocument Number) | | | |
| Certified Copies | Certificates o | of Status | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
| | | | | |
| | | | | |





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TRANSMITTAL LETTER

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

| SUBJECT: DRE | AMER DESIGNS BY MASSO, II | NC. | |
|-------------------------|--|--|---|
| | (PROPOSED CORPORA | TE NAME – <u>MUST INCL</u> | UDE SUFFIX) |
| Enclosed are an orig | inal and one (1) copy of the art | icles of incorporation and | l a check for: |
| □ \$70.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Cortified Copy ADDITIONAL CO | □ \$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED |
| FROM: | Orlando Masso Name (Printed or typed) | | |
| | 3528 | Nictoria Drive Address | |
| | | Beach, FL 33406 , State & Zip | |
| - | (561) 433-1064 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:

DREAMER DESIGNS BY MASSO, INC.

PRINCIPAL OFFICE ARTICLE II

The principal place of business/mailing address is: 3528 Victoria Drive West Palm Beach, FL 33406



ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

This corporation may engage in any business permitted under the laws of the United State, the State of Florida, or any other State, Country, Territory, or Nation.

ARTICLE IV SHARES

The number of shares of stock is:

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

President: Orlando Masso Vice-President: Nancy I. Masso

ARTICLE VI REGISTERED AGENT

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

Orlando Masso President/Incorporator/Registered Agent

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: Orlando Masso President/Incorporator/Registered Agent 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 October 27, 2004 Signature/Registered Agent Date October 27, 2004 Date Signature/Incorporator