P0500002/605

(Red	questor's Name)	
(Add	Iress)	
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(City	/State/Zip/Phone	∋ #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	
		<u>.</u>



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Office Use Only

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TRANSMITTAL LETTER

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

SUBJECT: Wish Bo	outique Inc.			
	(PROPOSED CORPORA	TE NAME - MUST INCL		
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:	Suzanne A. Ward Name (Printed or typed)			
-		ndlewick Road Address		
-		Springs, FL 32714 State & Zip		
-		770-9474		

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



05 FEO 10 PM 12: 45

FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

January 24, 2005

SUZANNE A WARD 114 CANDLEWICK RD ALTAMONTE SPRINGS, FL 32714

SUBJECT: WISH BOUTIQUE INC. Ref. Number: W05000003675

We have received your document for WISH BOUTIQUE INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Document Specialist New Filings Section

Letter Number: 605A00004680

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:

Wish Boutique Inc.

05 FEB 10 PM 4: 09

SECRETARY OF STATE TALLAHASSET FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 114 Candlewick Road Altamonte Springs, FL 32714

<u>ARTICLE III PURPOSE</u>

The purpose for which the corporation is organized is: To conduct business as a specialty boutique

ARTICLE IV SHARES

The number of shares of stock is: 50

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Suzanne A. Ward: President

Stephen Schmeelk: Board of Directors

Cheryl S. Ward: Secretary

	ARTICL	e vi	REGISTERED AGE	VT
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The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:

Cheryl S. Ward 114 Candlewick 12d Altamonte Springs, FL 32714

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Suzanne A. Ward 114 Candlewick Road Altamonte Springs, FL 32714

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I app familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Date

Ignature/Incorporator

1 - 14 - 05 Date