# Po5000050558

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(Chiji Calculation II)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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113/22/05--01057--004 \*\*78.75



## TRANSMITTAL LETTER

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

SUBJECT: 60	olden Reams PROPOSED CORPOR	Tuc, rate name- <u>must incl</u>	UDE SUFFIX)
Enclosed are an orig	rinal and one (1) copy of the a	urticles of incorporation and	a check for:
\$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 PY REQUIRED
FROM:	TRACEY BRAIN	me (Printed or typed)	
		ity, State & Zip	

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



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood

05 APR -5 AM 8: 17

RECEIVED

Secretary of State

THE CARLIMENT OF STATE LIGHTON OF CHAPLEAFERS THE LARACTE FLORIDA

March 29, 2005

TRACY BRANHAM 13161 NE 41 TERRACE ANTHONY, FL 32617

SUBJECT: GOLDEN DREAMS INC. Ref. Number: W05000015953

We have received your document for GOLDEN DREAMS INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L02000013567 (GOLDEN DREAMS, LLC).

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: 305A00021264

# ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAME 05 APR -5 PM 4:01 The name of the corporation shall be: SECRETARY OF STATE DUR Golden Dreams INC. TALLAHASSEE FLORIDA ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: BILD NE 41 TERRACE ANTHONY F1. 33617 ARTICLE III PURPOSE The purpose for which the corporation is organized is: To provide individualized services for people requiring THE SAID SERVICE ARTICLE IV SHARES The number of shares of stock is: ### 20 INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): TRACEY BRANHAM, PRESident AMY GREENE VICE PRESIDENT 13/61 NE 41 TETTACE 13161 NE 41 Terrace ANTHONY, F1, 32617 HNTHONY, PI 32617 REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: AMU GREENE BIGINE 41 Terrace ANTHOMY, FI 32417 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: TRACEY BRANHAM 1316 INE 41 TErrace ANTHONY, F1 32617 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 3/27/05 /4/3/05 Date 3/27/05 /4/3/05 Signature/Registered Agent

Signature/Incorporator