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



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WSA

TRANSMITTAL LETTER

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

| SUBJECT: | OIUSH Plus MO | eternity of | Nore |
|-------------------|---|--|--|
| | | | |
| S70.00 Filing Fee | inal and one (1) copy of the arti \$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: | Melissa A-1 Name | | · |
| - | • | Address 3027 State & Zip | |
| - | 305. 110. 54 | 68 | |

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: Blush Dlus matchnity corp. En 5 En 5 |
| The name of the corporation shall be: Blush Dlus maternity corp. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 14299 Sw 415T miremor F1, 3302708 |
| ARTICLE III PURPOSE The purpose for which the corporation is organized is: SCITING MOLLEVNITY AND INFENT ITEMS |
| ARTICLE IV SHARES The number of shares of stock is: 50 51018 Common Stocks at # 1:00 per valid. |
| ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): MC1559 O-MAN 14299 SW 41ST MINAMOR F1, 33027 |
| ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: |
| Melissa amano 14299 SW 41ST MINCORPORATOR The name and address of the Incorporator is: Melissa amano 14299 SW 41 ST |
| 14299 SW 41 ST miramar Fl, 3807 ************************************ |
| 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 |
| Signature Registered Agent Date 0/3/05 Date |
| Signature/Incorporator Date |