# P05000104598

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# TRANSMITTAL LETTER

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

SUBJECT:	PLAYDELL INTERNATIONAL, CORP.			
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)				
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation an	d a check for:	
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO	PY REQUIRED	
FROM:		EAM HSA, CORP.		
	Name (F	Printed or typed)		
		D BLVD STE. #204		
	F	Address		
	City, State & Zip			
	(954) 986-8875			
	Daytime Telephone number			

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

# <u>ARTICLES OF INCORPORATION</u>

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

# ARTICLE I NAME

The name of the corporation shall be:

PLAYDELL INTERNATIONAL, CORP.

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1198 NORTHWEST 86 LANE **CORAL SPRINGS, FLORIDA 33071** 

### *ARTICLE III PURPOSE*

The purpose for which the corporation is organized is:

THE CORPORATION SHALL ENGAGE IN ANY ACTIVITY OR BUSINESS PREMITTED UNDER THE LAW OF THE UNITED STATES AND THE STATE OF FLORIDA.

# ARTICLE IV SHARES

The number of shares of stock is:

250,000 SHARES OF COMMON STOCKS.

# ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address (es) and title(s):

**EUGENIA GREY** 1198 NORTHWEST 86 LANE PRESIDENT

**CORAL SPRINGS, FLORIDA 33071 LURLINE MONTGOMERY** 

**DELORES V. WASHINGTON** SECRETARY TREASURER **DORIS V. POOLE** 

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

HOME TEAM HSA, CORP. 3911 HOLLYWOOD BLVD STE. #204 HOLLYWOOD, FLORIDA 33021

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LOUIS M. LEWIS P.O. BOX 55-2559 MIAMI, FLORIDA 33055-2559

**PATRICIA LYLES** 

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

SVP

DIRECTOR

Signature/Registered Agent

Signature/Incorporator