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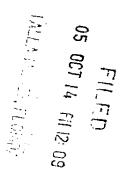
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PICK-UP WAIT MAIL				
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Certified Copies Certificates of Status				
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Special Instructions to Filing Officer:				
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## **COVER LETTER**

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

SUBJECT: PJS SWEETS AND Treats VENDING, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

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	& Certificate of Status	& Certified Copy	Certified Copy	
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		ADDITIONAL COPY REQUIRED		
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FROM:	regau J. ST.	ENBERGER		
FROM: Peggy J. STEINBERGER  Name (Printed or typed)				
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		22/0//		
TAMPA, FL 33604 City, State & Zip				
-	City	, State & Zip		
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(UM)# 1-866-321-8871 EXT. 813-231-3119				
le/ay# 1-866-327-8877 Ext. 813-231-3179  Daytime Telephone number				

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME	
The name of the corporation shall be:	
PJS SWEETS AND TREATS VENDIN	ra, INC.
To a careful that the same	<i>)</i>
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
219 W. FERN STREET	
TAMPA, FL 33604	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
FOR ALL Legal Activities AllowED WND	ER FLORIDA STATE LAW
ARTICLE IV SHARES	
The number of shares of stock is:	
1,000	<u>.</u>
ARTICLE V INITIAL OFFICERS AND/OR DIRECTOR	<u> </u>
List name(s) address(es) and specific title(s):	FILED  05 OCT 14 FILE: 09  ALLIAN ALLIANA  SAI
Prost T STEINBERAPE - President	
Peggy J. STEINBERGER - President 229W. FERN STREET	
129 D. PERD STREET	
TAMPA, FL 33604	<u> </u>
	09
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of	the registered agent is:
Peggy J. STEINBERGER.  229 W. FERN STREET  TAMPA, FL 33604	
229 W. FERN STREET	
TAMPA, FL 33604	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
PEGGY J. STEINBERGER 129 W. FERN STREET	
229 W. FERNSTREET	
**************************************	***********
Having been named as registered agent to accept service of process for the above certificate, I am familiar with and accept the appointment as registered agent and a	
Separal Strilance	(0 0 1/-
Signature/Registered Agent	Date
Signature Registered Argent	Lo di -
Hogyff. Summer och	10-8-05
Sigure/Incorporator	Date

, ARTICLES OF INCORPORATION