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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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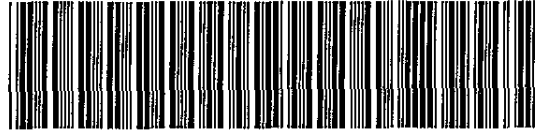
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CS 12-2

TRANSMITTAL LETTER

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

SUBJECT: Mozart's Artistic Designs, Inc
(Proposed corporate name - must include suffix)

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

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Moises Gonzalez
Name (Printed of typed)
4350 Hwy 92 East
Address
Plant city, FL 33566
City, State & Zip
813-317-8136 863-397-8961
Daytime Telephone number

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

ARTICLES OF INCORPORATION

1. The name of the corporation shall be: Mozart's Artistic Designs, Inc

2. The principal place of business and mailing address of the corporation is: 4350 Hwy 92 East Plant City FL 33576

3. The corporation shall have the authority to issue 1,000,000 shares of stock.

4. The registered agent of the corporation is Moises Gonzalez and the registered street address is 4350 Hwy 92 East Plant city FL Florida 33576.

5. The initial Board of Directors shall have 2 member(s) whose name(s) and address(es) is/are as follows: Moises Gonzalez 3602 Landings Way Dr. Apt 307 Tampa FL 33624
Jerry Lincoln 4350 Hwy 92 East Plant City FL 33576

The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

6. The incorporator of this corporation is Moises Gonzalez whose street address is 4350 Hwy 92 East Plant city, FL 33576

Dated 12/16/05

[Signature]
Incorporator

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TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Dated 12/16/05

[Signature]
Registered Agent