P06000	076344
(Requestor's Name) (Address) (Address)	400075278784
(City/State/Zip/Phone #)	- 86/01/0630008083**78,75_
(Business Entity Name) (Document Number)	06/02/0601005003 **78.75
Certified Copies Certificates of Status	FILESORIDA SECRETARY OF STATE TALLAHASSEE, FLORIDA

Office Use Only

COVER LETTER

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

SUBJECT: ENCORE CONSIGNMENT, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

570.00 Filing Fee

Filing Fee & Certificate of Status

▼ \$78.75	\$87. 50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
ADDITIONAL CO	PY REQUIRED

FROM: SHANNON L YOUNG DEZZA

Name (Printed or typed)

PO BOX 352268

Address

PALM COAST, FL 32135

City, State & Zip

386 503-7990

Daytime Telephone number

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: ENCORE CONSIGNMENT, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: PO BOX 352268 PALM COAST, FL 32135

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **RETAIL SALES**

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V **INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

SHANNON L YOUNG DEZZA PO BOX 352268 PALM COAST, FL 32135 - PRESIDENT CARLOS DEZZA PO BOX 352268 PALM COAST, FL 32135 - VICE PRESIDENT

REGISTERED AGENT ARTICLE VI

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: CARLOS DEZZA 12 FIRCREST LANE PALM COAST, FLORIDA 32137

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SHANNON L YOUNG DEZZA PO BOX 352268 PALM COAST, FL 32135

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

gnature/Registered Agent

FILED

06 JUN -2 PH 4:37

SECRETARY OF STATE TALLAHASSEE, FLORIDA