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To:

Division of Corporations

Fax Number : (850) 205-0381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.

Account Number : 120000000257 Phone : (850)224-8870 Fax Number : (850)224-7047

FLORIDA PROFIT/NON PROFIT CORPORATION

THE TEA CUP TEA ROOM, GIFTS & EVENTS, INC.

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NO. 9025 P. 2

SECRETARY OF STAIL
DIVISION OF CORPORATIONS

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ARTICLES OF INCORPORATION

OF

THE TEA CUP TEA ROOM, GIFTS & EVENTS,

INC.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation is THE TEA CUP TEA ROOM, GIFTS & EVENTS, INC.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 3013 Folklore Dr., Valrico, FL 33594

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is ten thousand (10,000) shares having a par value of (\$1.00) per share.

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ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Lynn S. Davis, 3013 Folklore Dr., Valrico, FL 33594

ARTICLE V: OFFICERS AND DIRECTORS

The name and address of the initial Officer and Director is: Lynn S. Davis, Pres./Sec., 3013 Folklore Dr., Valrico, FL 33594 Paul M. Davis, V. Pres., 3013 Folklore Dr., Valrico, FL 33594

ARTICLE VI: SPECIAL PROVISIONS

It is the intent of the incorporator and directors that the corporation qualify under Section 1244 of the Internal Revenue Code and that the corporation file as a Sub S Corporation. Such actions as are necessary will be taken by the appropriate officers to accomplish this compliance.

ARTICLE VII: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Your Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

The undersigned has executed these Articles of Incorporation this 27th day of June 2006.

Your Capital Connection, Inc. by Weimar Lopez, Client Representative

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CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

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ja:	The r	name and	ore Dr	address	of the	regist	ered a	agent a	and o	ffice
	3013	Folk	ore Dr. 33594							
	yam	<u> </u>	<u> </u>	/	· — · —.		<u> </u>			

HAVE 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 I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

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SECRETARY OF STAIL
DIVISION OF CORPORATIONS