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TRANSMITTAL LETTER

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

SUBJECT: NATUR	E OF ART GALLERY, INC.		
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
	,	<u>.</u>	٠
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: SA	NDRA WILLIAMS		
	Nam	e (Printed or typed)	
	1023 SNELL ISLE BLVD NE	Address	
		Addiess	
<u>:</u>	ST PETERSBURG, FL 33704		
	City	, State & Zip	
	727-896-3232	Telephone number	

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 62 1, F. S. (Profit)

ARTICLE I *NAME*

The name of the corporation shall be:

NATURE OF ART GALLERY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 1023 SNELL ISLE BLVD NE, ST PETERSBURG, FL 33704

ARTICLE III <u>PURPOSE</u>

The purpose for which the corporation is organized is: ART GALLERY

ARTICLE IV **SHARES**

The number of shares of stock is: 100

INITIAL OFFICERS AND/OR DIRECTORS ARTICLE V

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

SANDRA WILLIAMS, PRESIDENT, 1023 SNELL ISLE BLVD NE, ST PETERSBURG, FL 33704 KATHY CROTTS, VP, 4317 OVERLOOK DR NE, ST PETERSBURG, FL 33703

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

SANDRA WILLIAMS, 1023 SNELL ISLE BLVD NE, ST PETERSBURG, FL 33704

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SANDRA WILLIAMS, 1023 SNELL ISLE BLVD NE, ST PETERSBURG, FL 33704

Having been named as registered agent to accept service ofprocess 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

Signature/Registered Agent

Signature/Incorporator