

PO7000029569

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2007 MAR - 6 PM 3:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Hampton MAR - 7 2007

**COVER LETTER**

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

SUBJECT: FAMILY FRIENDS NETWORK, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate of Status

☒ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: EUGENIA OR RICARDO ORMSBY  
Name (Printed or typed)

3329 SW MUNDY ST.  
Address

PORT ST. LUCIE, FL 34953  
City, State & Zip

772-621-0295  
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:

FAMILY N FRIENDS \_ NETWORK, Inc

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3329 SW MUNDY ST  
PORT ST. LUCIE, FL 34953

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TOTAL WELLNESS FOR THE COMPLETE BODY, SOUL, MIND, AND SPIRIT  
ENTERTAINMENT CENTER

### ARTICLE IV SHARES

The number of shares of stock is:

2

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

EUGENIA S. ORMSBY / CEO  
RICARDO F. ORMSBY / PRESIDENT  
3329 SW MUNDY ST.  
PORT ST. LUCIE, FL 34953

### ARTICLE VI REGISTERED AGENT

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

EUGENIA S. ORMSBY  
3329 SW MUNDY ST.  
PORT ST. LUCIE, FL 34953


### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

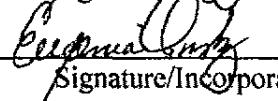
EUGENIA S. ORMSBY  
3329 SW MUNDY ST.  
PORT ST. LUCIE, FL 34953

\*\*\*\*\*

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

  
\_\_\_\_\_  
Signature/Registered Agent

3/2/07  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

3/2/07  
\_\_\_\_\_  
Date

### ARTICLE VIII EFFECTIVE DATE

MARCH 5, 2007