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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
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TRANSMITTAL LETTER

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

SUBJECT: LOUIE Orkes / MC (Proposed corporate name - must include suffix)				
(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	\$78.75	□\$122.50	\$131.25	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate	& Certified Copy	Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM: Carolina Stifter Name (Printed or typed)				
Name (Printed or typed)				
5122 Cortez Ct. Address				
Delray Beach, FL 33484 City, State & Zip				
(w)954-772-9819				

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

Daytime Telephone number

ARTICLES OF INCORPORATION

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 shall be:

Lovie Cakes, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 5122 CONTEZ CT

DELRAY BRACH, FL 33484

<u>ARTICLE III SHARES</u>

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One hundre

ARTICLE IV _ INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

CAROLINA STIFTER

5/22 CONTEZ.DR

DELRAY BEACH, FL- 33484

ARTICLE V <u>INCORPORATOR</u>

The name and address of the incorporator to these Articles of Incorporation are:

CAROLINA STIFTER

5122 CONTEZ. DE

DELRAY BEACH, FL. 33484

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

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 I am familiar with and accept the obligations of my position as registered agent

Signature/Registered Agent

Date