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COVER LETTER

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

SUBJECT:	TAMMY'S BAKERY, INC.			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
		-		
Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and	d a check for:	
\$70.00	x \$78.75	\$78.75	\$87.50	
Filing Fee	Filing Fee & Certificate of Status	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of	
			Status	
		ADDITIONAL CO	DPY REQUIRED	
			· · · · · ·	
FROM:	MONICA MONTERO			
	Name (Printed or typed)			
	14718 SW 168 STREET			
		Address		
	MIAMI, FL 33187	NGUI VOS		
	HIAHI, FL 33107			
	City, State & Zip			
	305-898-9151			
		2-11		
	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:

TAMMY'S BAKERY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

14718 S. W. 168TH STREET MIAMI, FL 33187

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO SELL BAKED GOODS.

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):

MONICA MONTERO, CEO, CFO, VICE-PRESIDENT 14718 SW 168 STREET MIAMI, FL 33187

JOHN MONTERO, PRESIDENT, TREAS, SECRETARY 14718 SW 168 STREET MIAMI, FL 33187

ARTICLE VI REGISTERED AGENT

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

MONICA MONTERO 14718 SW 168 STREET MIAMI, FL 33187

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

MONICA MONTERO 14718 SW 168 STREET MIAMI, FL 33187

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

Signature/Incorporat

Date

Date