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TRANSMITTAL LETTER

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

SUBJECT: KIDZ	Z WORKSHOP INC:		
	(PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUFFIX)
		,	
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	l a check for:
\$70.00	\$78.7 5	\$78.75	☑ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
		-	& Certificate of
			Status
		ADDITIONAL CO	PY REQUIRED
	ACOBO & ASSOCIATES II	JC	
FROM:	Nam.	e (Printed or typed)	
		(i i i i i i i i i i i i i i i i i i i	
	6230 WEST 21 CT		
		Address	
	HIALEAH, FL 33016		•
	•	, State & Zip	
	(305) 556-0044		
	· · · · · · · · · · · · · · · · · · ·	Telephone number	

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

FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

P.O.BOX 6327

TALLAHASSE, FL 33016

AFFIDAVITS

REF: N07000004269 "Kidz workshop Inc"

Dear Sir/Madam

I, Silvia Beltran, president of the above mentioned dissolved corporation (see attachment of dissolution).

The present document stating that I will not revoke the articles of incorporation, and at the same time

I am releasing the name "Kidz workshop Inc"

If you need further information do not hesitate in contacting me as soon as possible

Sincerely Yours

Silvia Beltrar

Liqued & course before this 14th Signed & course before this 14th September 2007 Devorall y known Port at 6720 w 21 ct waleah Fl.33016

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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: KIDZ WORKSHOP INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 749 E BROOKEDGE AVE PORT ST LUCIE, FL 34983

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

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): SILVIA BELTRAN 749 E BROOKEDGE AVE PORT ST LUCIE, FL 34983 PRESIDENT

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> of the registered agent is:

JACOBO & ASSOCIATES INC 6230 W 21 CT HIALEAH, FL 33016

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SILVIA BELTRAN 749 E BROOKEDGE AVE PORT ST LUCIE, FL 34983

PORT ST LUCIE, FL 34983	
**************************************	**************************************
Collin Service	09/14/2007
Signature/Registered Agent	Date 9-14-07
Signature/Incorporator	Date