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PICK-UP	MAIT WAIT	MAIL.		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
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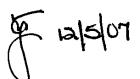


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Office Use Only

691 W07-57517



# **COVER LETTER**

SECRETARY OF STATE DIVISION OF COMPORATIONS

07 DEC -4 PH 1:29

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

SUBJECT:	SpraketLose Inc.			
	(PROPOSED CORPORA	TTE NAME - MUST INCL		
\$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 o Status PPY REQUIRED	
FROM:		Paul Beckford Name (Printed or typed)		
*	11304 S	W 189th St.	· · · · · · · · · · · · · · · · · · ·	
		FL 33157 , State & Zip		
		242-7498 Telephone number		

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



HILED SECRETARY OF STATE DIVISION OF CORPORATIONS

07 DEC -4 PH 1:29

# FLORIDA DEPARTMENT OF STATE Division of Corporations

November 26, 2007

PAUL BECKFORD 11304 SW 189TH STREET MIAMI, FL 33157

SUBJECT: SPRAKETLOSE INC. Ref. Number: W07000057517

We have received your document for SPRAKETLOSE INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2008 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 507A00067096

# 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:

# SpraketLose Inc.

SECRETARY OF STATE DIVISION OF CORPORATIONS

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# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 11304 SW 189th St.
Miami, FL 33157

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose for which the Corporation is formed are to engage in any lawful act or activity for which corporations may be organized under the general laws of the State of Florida as now or hereafter in force.

### ARTICLE IV SHARES

The number of shares of stock is:

10 shares of common stock with \$100 par value. Said Incorporator as stated in Article V shall be the owner of all the shares of common stock.

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Director:

- A. The business and affairs of the corporation shall be managed by the Board of Directors.
- B. There shall be no fewer than one (1) director, and there shall be no fewer directors than the number of shareholders.
- C. The names and addresses of the Directors constituting the first Board of Directors shall be:

Paul Beckford 11304 SW 189th St. Miami, FL 33157

# ARTICLE VI REGISTERED AGENT

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

The address of the principal corporation is the State of Florida is 11304 SW 189th St. Miami, FL 33157 Attention: Paul Beckford. The name of the resident agent of the corporation in the State of Florida is Paul Beckford, whose post office address is 11304 SW 189th St. Miami, FL 33157. The resident agent is a resident of the United States and resides in the State of Florida.

# ARTICLE VII INCORPORATOR

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

The undersigned, Paul Beckford, whose address is 11304 SW 189th ST. Miami, FL 33157, being at least 18 years of age, does hereby form a corporation under the general laws of the State of Florida.

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/Incorporator

\_\_\_

Date

07 DEC -4 PM 1.20