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Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			
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SECRETARY OF STATE

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# **COVER LETTER**

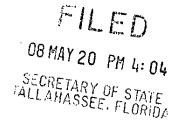
Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Sole Sp	olenderá, Inc.	ATE NAME – <u>MUST INCI</u>	TINE SUFFIX
	·		
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	l a check for:
\$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 of Status  PY REQUIRED
FROM: _Je	ennifer Schwartz	e (Printed or typed)	
	Name	(Printed or typed)	
	1845 South Tropical Trail	Address	<del></del>
	Merritt Island, FL 32952	y, State & Zip	····
	321-537-8235 Daytime	Telephone number	<u>.</u>

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: Sole Splenderá, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address of this corporation shall be:

1845 South Tropical Trail Merritt Island, FL 32952

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1,000.

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADRESS

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

Jennifer Schwartz 101 East Dover ST Satellite Beach, FL 32937

## ARTICLE V INCORPORATOR

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

George Hagal

1845 South Tropical Trail

Merritt Island, FL 32937

Signature Informorator

Date

Having been named as the 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

Date