

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000185889 3)))



H080001858893ABCE

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : FASTKIT CORPORATE OUTFITS
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

DIVISION OF CORPORATION

08 AUG - 1 PM 1:31

RECEIVED

FLORIDA PROFIT/NON PROFIT CORPORATION

NATURAL CUDDLES CORPORATION.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 AUG - 1 PM 1:36

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

H08000185889 3

FILED

08 AUG -1 PM 1:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:
Natural Cuddles Corporation.

ARTICLE II PRINCIPAL PLACE OF BUSINESS

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

5174 NE 3rd Ct Apt. 2
Miami FL 33137

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 1000 shares of common stock of a par value of one dollars. (\$ 1.00).

ARTICLE IV NATURE OF BUSINESS

The general nature of the business to be transacted by this Corporation is import and sale organic baby apparel, and any other legal activities.

ARTICLE V TERMS OF EXISTENCE

The Corporation shall have perpetual existence.

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Lior Friedman
5174 NE 3rd Ct Apt. 2
Miami FL 33137

H08000185889 3

H08000185889 3

ARTICLE VII INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

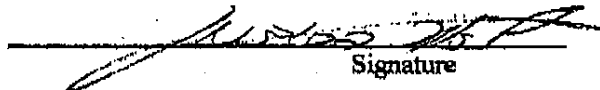
Lior Friedman
5174 NE 3rd Ct Apt. 2
Miami FL 33137

ARTICLE VIII DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

Lior Friedman
5174 NE 3rd Ct Apt. 2
Miami FL 33137

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this First day of August, 2008.


Signature

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/ REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/ registered agent, in the State of Florida.

The name of the corporation is: Natural Cuddles Corporation.

H08000185889 3

H08000185889 3

FILED

08 AUG -1 PM 1:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The name and address of the registered agent and office is:

Lior Friedman
5174 NE 3rd Ct Apt. 2
Miami FL 33137

(P.O.BOX NOT ACCEPTABLE)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 

DATE: First day of August, 2008

H08000185889 3