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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

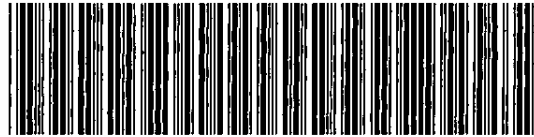
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2008 SEP 17 PM 4: 15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch SEP 17 2008

## COVER LETTER

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

**SUBJECT:** Gilda's Sweeties, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Gilda Rivera

Name (Printed or typed)

405 S. Dale Mabry Highway Suite # 369

Address

Tampa, Fl. 33609

City, State & Zip

813-626-7868

Daytime Telephone number

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## 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:

Gilda's Sweeties, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

405 S. Dale Mabry Highway  
Suite # 369  
Tampa, FL. 33609

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To transact any and all lawful business within the State of Florida, United States and any Nation.

### 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):

Gilda Rivera - President	Angel Rivera - Vice President	David Garcia - Secretary	Tressa Scott - Treasurer
405 S. Dale Mabry Hwy	405 S. Dale Mabry Hwy	405 S. Dale Mabry Hwy	405 S. Dale Mabry Hwy
Suite # 369	Suite # 369	Suite # 369	Suite # 369
Tampa, FL. 33609	Tampa, FL. 33609	Tampa, FL. 33609	Tampa, FL. 33609

### ARTICLE VI REGISTERED AGENT

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

Gilda Rivera  
405 S. Dale Mabry Highway  
Suite # 369  
Tampa, FL. 33609

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Gilda Rivera  
405 S. Dale Mabry Highway  
Suite # 369  
Tampa, FL. 33609

\*\*\*\*\*

*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*

Gilda Rivera  
Signature/Registered Agent

9/11/08

Date

Gilda Rivera  
Signature/Incorporator

9/11/08

Date