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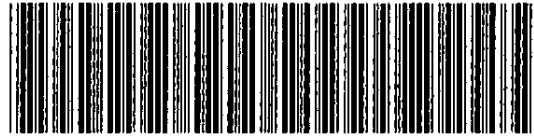
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CGVER-LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Slumber Parties By Sandra Giraldo

**DOCUMENT NUMBER:** \_\_\_\_\_

Incorporation  
The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sandra Giraldo

(Name of Contact Person)

Slumber Parties By Sandra Giraldo

(Firm/ Company)

3920 Woodside Drive #4

(Address)

Coral Springs, FL 33065

(City/ State and Zip Code)

For further information concerning this matter, please call:

Sandra Giraldo

(Name of Contact Person)

at (954) 663-5359

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☒ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy  
is enclosed)

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 30, 2008

SANDRA GIRALDO  
SLUMBER PARTIES BY SANDRA GIRALDO  
3920 WOODSIDE DRIVE E4  
CORAL SPRINGS, FL 33065

SUBJECT: SLUMBER PARTIES BY SANDRA GIRALDO, INC.  
Ref. Number: W08000039510

We have received your document for SLUMBER PARTIES BY SANDRA GIRALDO, INC. and your check(s) totaling \$43.75. However, the document has not been filed and is being retained in this office for the following:

You have been in contact with our amendment section concerning this filing. They advised you that you needed to submit an additional fee to get this processed. To this date we have not received the additional fee that is required to process this filing. If you wish to proceed with the filing please send an additional \$35.00 so we can process the filing.

Please return 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) 245-6913.

Diane Cushing  
Document Specialist Supervisor

Letter Number: 608A00052060

## 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:

Slumber Parties By Sandra Giraldo, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3920 Woodside Dr. #4, Coral Springs, FL 33065

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The corporation is organized for the purposes of transacting any and all lawful business for which a corporation may be incorporated under Florida corporation laws, today and here after.

### 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):

Sandra Giraldo, 3920 Woodside Dr. #4, Coral Springs, FL 33065, President / CEO

### ARTICLE VI REGISTERED AGENT

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

Sandra Giraldo, 3920 Woodside Dr. #4, Coral Springs, FL 33065

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Sandra Giraldo, 3920 Woodside Dr. #4, Coral Springs, FL 33065

\*\*\*\*\*

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.

Sandra Giraldo

Signature/Registered Agent

Sandra Giraldo

Signature/Incorporator

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TALLAHASSEE, FLORIDA

8-4-08

Date

8-4-08