

P09000011562

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

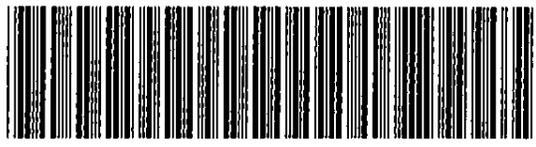
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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02/04/09--01053--017 \*\*87.50

FILED  
09 FEB -4 PM 4:30  
SECRETARY OF STATE  
FALLAHASSEE, FLORIDA

EP 2/5/09

TRANSMITTAL LETTER

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

SUBJECT: The Creative Dream by Tonie  
(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: Antoinette Braswell  
Name (Printed or typed)

7137 southwest 109 court  
Address

Miami, FL 33173  
City, State & Zip

305 - 962 - 8924  
Daytime Telephone number

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 Creative Dream by Tonie, Inc.

**ARTICLE II PRINCIPAL OFFICE**

7137 Southwest 109 Court  
Miami, Florida 33173

**ARTICLE III PURPOSE**

Any and all lawful business

**ARTICLE IV SHARES**

The number of shares of stock is 1000 common stock with a par value of fifty cents each.

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

Antoinette Braswell, President  
7137 Southwest 109 Court  
Miami, Florida 33173

**ARTICLE VI REGISTERED AGENT**

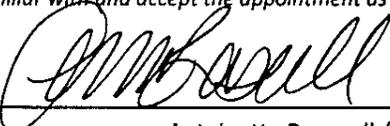
Antoinette Braswell  
7137 Southwest 109 Court  
Miami, Florida 33173

**ARTICLE VII INCORPORATOR**

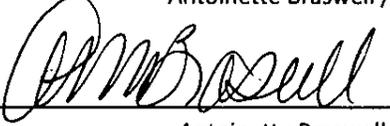
Antoinette Braswell  
7137 Southwest 109 Court  
Miami, Florida 33173

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SECRETARY OF STATE  
TALLAHASSEE, 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*

  
\_\_\_\_\_  
Antoinette Braswell /Registered Agent

2/1/09  
Date

  
\_\_\_\_\_  
Antoinette Braswell /Incorporator

2/1/09  
Date