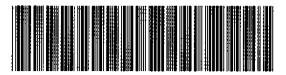
209000047778

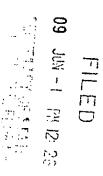
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



600155867326

05/13/09--01014--023 **87.50





COVER LETTER

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

SUBJECT: J&	CARDS INC. (PROPOSED CORPORA	TE NAME - MUST INCI	UDE SUFFIX
Enclosed are an orio	inal and one (1) copy of the artic		
\$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
FROM: wil	liam thomas Name ((Printed or typed)	·· ···································
	7976 Seminole blvd #] Address	
	Seminole FL 33772 City,	State & Zip	
	(727) 230-6656 Daytime T	elephone number	

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 18, 2009

WILLIAM THOMAS 7976 SEMINOLE BLVD # 1 SEMINOLE, FL 33772

SUBJECT: J & B CARDS, INC. Ref. Number: W09000023025

We have received your document for J & B CARDS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

You must list at least one incorporator with a complete business street address.

Please return the corrected original and one copy of 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) 245-6052.

Paisley A Alford Clerk New Filing Section

Letter Number: 209A00016677

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: I+B CARdS INC. <u>ARTICLE II PRINCIPAL OFFICE</u> The principal street address and mailing address, if different is: 7976 SEMINULE BLUJ. SEMINOLE, FLORIDA 33772 ARTICLE III PURPOSE The purpose for which the corporation is organized is: 700 retail and wholesale GREEting CARds The number of shares of stock is: 1,000 ShAKES ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): William Thomas (PRESIDENT) SAME as Above Add. REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: 69111177M Thomas SAME as about Add. 7976 SEMINOLE BLUD. ARTICLE VII INCORPORATOR SEMINOIE, Florida 33772 The name and address of the Incorporator is: 7976 SEMINOLE BLVd. William Thomas Same Add as About Seminole, Florida 33772 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

Signature/Registered Agent

Signature/Incorporator