## P1900050U4

(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:		
ı		

Office Use Only



000156928660

06/11/09--01001--004 \*\*70.00

RECEIVED

OP JUN 10 PM 2: 53

ON THE PROPERTY OF THE PROPERTY

FILED

09 JUN 10 PH 2: 57

SECRETARY OF STATE
ALLAHASSEE, FLORID,

m. 1/0/00

## **COVER LETTER**

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

SUBJECT:	WPODOSED CORDON	5 10000		
	(FROPOSED CORPORA	TE NAME <u>MUST INCL</u> I	IDE SURFIX)	
Enclosed is an original	and one(1) copy of the Arti	cles of Incorporation and	a check for :	
Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL COPY REQUIRED		
FROM: SHAWN AWS-DENLARD  Name (Printed or typed)				
812 S. MACONBST.				
TAMAHASSIES FL 32301				

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

O9 JUN 10 PM 2:57 SECRETARY OF STATE TALLAHASSEE. FLORIDA	
AHASSE	€, R 32301
stered agent is:	
*****	****
orporation at the place t in this capacity	e designated in t

## 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:

FUN FACES, INC.

ARTICLE II PRINCIPAL OFFICE

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

812 S. MAZONB ST. TAWAHASSEE, FR

The purpose for which the corporation is organized is:

My and ALL LAURU BUSIN

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):

SHARON AMES-DENNARD, PRES; DANA O. DENNARD V-P. SEC

NEFETARE DENNARD TROISURER

ARTICLE VI REGISTERED AGENT

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

SHARIN AMES-DENNARD, 316 BARBOURINE DR.

ARTICLE VII INCORPORATOR 3230

The name and address of the Incorporator is:

SHARON AMES-DENNARD

316 BARBOURVIUE DR.

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