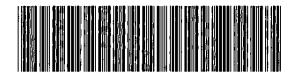
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PICK-UP WAIT MAIL				
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Special Instructions to Filing Officer: '				
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## COVER LETTER

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

SUBJECT:	Memories by Anne, Inc.		
Enclosed are an orig	(PROPOSED CORPORA inal and one (1) copy of the art	ATE NAME - MUST INCL	
☑ \$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 CO	DPY REQUIRED
FROM:	Jennifer Cardona Name (Printed or typed)		
	11110 West Oakland Park Blvd. #294 Address		
	Sunrise, FL 33351		
<del></del>	City, State & Zip		
<del>an and about</del>	305.785.4574  Daytime Telephone number		
	info@memoriesbyanne.com E-mail address: (to be used for future annual report notification)		

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 name of the corporation shall be:

Memories by Anne, Inc.



#### ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 11110 West Oakland Park Blvd. #294 Sunrise, FL 33351

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Creating both pre-made and custom scrapbooks, and picture frames, to commemorate special occasions and events.

### 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): Jennifer Cardona - President 11110 West Oakland Park Blvd. #294 Sunrise, FL 33351

# ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Jennifer Cardona 11110 West Oakland Park Blvd. #294 Sunrise, FL 33351

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: Jennifer Cardona 11110 West Oakland Park Blvd. #294 Sunrise, FL 33351

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/Incorporator

O8 | 02 | 09

Date

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Date

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Date