

PO9000083661

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

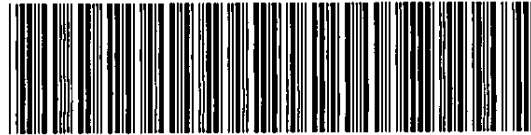
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
2009 OCT - 8 PM 2:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers OCT 09 2009

Charter Number Only

10/7/09
PBR

Requester's Name

Address

City

State

ZIP

Phone

VALIDATION ONLY

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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CORPORATION(S) NAME

SweetCHARITEES INC.

- ☒ Profit
☐ NonProfit
☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☒ Certified Copy
☐ Call When Ready
☒ Walk In
- ☐ Amendment
☐ Dissolution
☐ Annual Report
☐ Reservation
☐ Photo Copies
☐ Call If Problem
☐ Will Wait
- ☐ Merger
☐ Mark
☐ Other
☐ Change of Registered Agent
☐ Certificate Under Seal
☐ After 4:30
☒ Pick Up
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Name
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W.P. Verifier

Empire Toll Free: 1-800-432-3028

COVER LETTER

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

SUBJECT: SweetCHARITEES Inc.
(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:

SweetCHARITEES Inc.

Name (Printed or typed)

38 EDINBURGH DRIVE

Address

PALM BEACH GARDENS, FLORIDA 33418

City, State & Zip

561-622-3488

Daytime Telephone number

POPNAME@BELLSOUTH.NET

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:

Sweet CHARITIES INC.

ARTICLE II PRINCIPAL OFFICE

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

38 EDINBURGH DR.
PALM BEACH GARDENS, FL. 33418

P.O. Box 30734
PALM BEACH GARDENS, FL.
33420

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

HANDBAAG MANUFACTURE & SALES

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

PRES. FRANCES LASHINSKY, 1100 PALM PT. CIR. PALM BEACH GDNs, FL. 33418
V-PRES TORY ACKERMAN, 38 EDINBURGH DR. PALM BEACH GARDENS FL. 33418
TREAS. JUDY ANSCHER, 116 SWEET CUCU DR. PALM BEACH GARDENS FL. 33418
SEC'Y. DIANA LEVIN, 13505 TOUCHSTONE PL. PALM BEACH GARDENS, FL. 33418

ARTICLE VI REGISTERED AGENT

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

ARTHUR ACKERMAN
38 EDINBURGH DR.
PALM BEACH GARDENS, FL. 33418

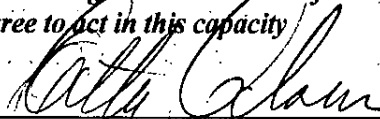
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

TORY ACKERMAN
38 EDINBURGH DR.
PALM BEACH GARDENS, FL. 33418

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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

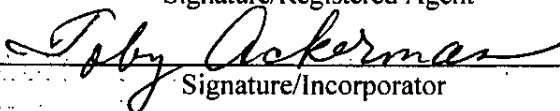


Signature/Registered Agent

ARTHUR ACKERMAN

10-6-09

Date



Signature/Incorporator

TORY ACKERMAN

10-6-09

Date