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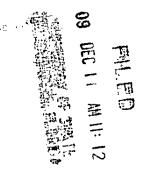
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## **COVER LETTER**

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

SUBJECT: Sweetpea's Concessi	
(PRO	POSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 \$78.75
Filing Fee Filing Fee

& Certificate of Status

Sweetpea's Concessions, Inc.  Name (Printed or typed)
rame (rimed of typed)
3435 Excalibur Way, E
Address
Jacksonville, FL 32223-7324
City, State & Zip
904-612-3717
Daytime Telephone number
<b>t</b>
tishimself3@gmail.com
•

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: SWEETPEA'S CONCESSIONS, INC.

### PRINCIPAL OFFICE ARTICLE II

The principal street address and mailing address, if different is: 3435 EXCALTBUR WAY E. JACKSONVILLE, FL. 32223-7324

### ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

### ARTICLE IV SHARES

The number of shares of stock is: 100

# INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): JIM SHIELDS PRESTOENT JIM SHIELDS VICE PRESIDENT

JIM SHIELDS SECRETARY TREASURER VIMSHIELDS 3435 EXCALIBUR WAYE TACKSONVINE, FL 31223.

REGISTERED AGENT

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

JIM SHIELDS 3435 EXCALTBURWAYE TACKSON VILLE, FL. 32223-7324

# ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

JIM SHIENDS 3435 EXCALTBUR WAYE TACKSONVILLE, FL. 32223-7324

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

Registered Agent

Signature/Incorporator

12. 8-2009 Date 12. 8. 2009