P1000/02434

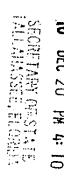
(Re	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	





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COVER LETTER

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

SUBJECT:	Scrappin' the Forest, Inc.				
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)		
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	a check for:		
\$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		
		ADDITIONAL CO	T REQUIRED		
FROM:	Vivian L. Liotta				
	Name	(Printed or typed)			
	17420 SE 66th St.				
	Address				
	Ocklawaha, FL 32179				
City, State & Zip					
	352	-625-3197			
		elephone number			
	acfhrts	19@aol.com			
-	E-mail address: (to be use		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:

Scrappin' the Forest, Inc.

FILED 10 DEC 20 PM 4: 10

SECRETARY OF STATE FINALIZARIASSEE, FLOREIA

ARTICLE II PRINCIPAL OFFICE

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

17420 SE 66th St., Ocklawaha, FL 32179

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of the corporation is to conduct any lawful purpose or purposes.

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):

Vivian L. Liotta - President - 17420 SE 66th St., Ocklawaha, FL 32179

ARTICLE VI REGISTERED AGENT

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

Corporation Service Company 1201 Hays Street Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

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

Vivian L. Liotta - 17420 SE 66th St., Ocklawaha, FL 32179

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

Date

12/14/10

Date