P 1/000032800

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

Office Use Only

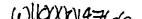


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COVER LETTER

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

UBJECT: PIPPI LONG STITCHES (PROPOSED CORPORATE NAME - MUST-INCLUDE SUFFIX)								
(PROPOSED	CORPORATE NAME - MUST-INCLUDE SUFFIX) [
Enclosed are an original and one (1) cop	y of the articles of incorporation and a check for:							
\$70.00 Filing Fee & Certificate of S	\$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy Certificate Of Status ADDITIONAL COPY REQUIRED							
	ADDITIONAL COLL REQUIRED							
FROM:) 1 NO	Name (Printed or typed)							
2420	CLUBHOUSE CIRCLE #203 Address							
SAR	A SOTA, F-L 34232 City, State & Zip							
9	41 - 312 - 4982 Daytime Telephone number							
上しい E-mail addres	S: (to be used for future annual report notification)							

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



RECEIVED

11 APR -1 PH 1:05

FLORIDA DEPARTMENT OF STATE

Division of Corporations

NUSION OF CORPORATIONS

March 15, 2011

LINDA CHANDLER 2420 CLUBHOUSE CIR #203 SARASOTA, FL 34232

SUBJECT: PIPPI LONGSTITCHES Ref. Number: W11000014766

We have received your document for PIPPI LONGSTITCHES and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6995.

Jessica A Fason Regulatory Specialist II

Letter Number: 011A00006271

www.sunbiz.org

DO DOM DO DI LI COO

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NA The name of the corpora		PIPPI	LONGST	1 T C H ES	Q 0			
_ _ 2	Principal street		CIRCLE		ailing address, if			
ARTICLE III PUR The purpose for which	RPOSE the corporation	is organized is:	EMBROIDS	ERY – t	PANDWAF	६ मो	EMS	
ARTICLE IV SH. The number of shares of ARTICLE V INT Name and Title: Address:	LINDA 2420 C	RS AND/OR D	Nan CIRCLE Add	ne and Title:_ lress:				
Name and Title: Address:	· — — — — — —			ne and Title:_				
Name and Title:_ Address:		·	Add	lress:	ere, but they be the		1	
The <u>name and Florida</u> s Name: Address:	LIND JH 24 SAN CORPORATOR of the Incorporat LINDA	P.O. Box NOT ac A CHAM CLWB III 2PS MA, 1: cor is:	1152 61722 1152 61722	203	is:	WEST OF STILL	PR -1 PH 4: 02	
Having been named as this certificate, I am fan I submit this document document to the Departs	registered agentialiar with and acceptance Required Signand affirm that	to accept service ccept the appoint ap	e of process for the ment as registered Agent herein are true.	he above state agent and ag	ree to act in this o	Capacity 3/V/ Date		
· · · · · · · · · · · · · · · · · · ·	Required S	ignature/Incorpo	rator	- · · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · ·	5/8/)1 Date		