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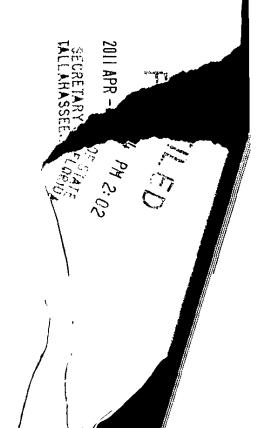
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity (48)He)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: 15ty 19e GAVE
AUTHORIZATION BY PHONE TO
CORRECT The entity Suffix
DATE 4-5-11 AT 3:52
DOC. EXAM. SC
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SC 4-1

COVER LETTER

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

_{SUBJECT:} <u>Mommy & Me</u> Consign	ment				
(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)		_	
Enclosed are an original and one (1) copy of the arti	cles of incorporation and	l a check for:			
\$70.00 \$78.75	\$78.75	\$87.50			
☐ Filing Fee ☐ Filing Fee	Filing Fee	Filing Fee	;,		
& Certificate of Status	& Certified Copy	Certified (Сору		
	<u> </u>	& Certific	ate of		
		Status			
	ADDITIONAL CO	ED			
	<u></u>				
FROM: Misty Page					
Name	(Printed or typed)		<u> </u>		
6901 South Dixie Highwa	ay				
· · · · · · · · · · · · · · · · · · ·	Address				
West Palm Beach,FL 33	3405		<u> </u>	20	
City,	State & Zip		<u> </u>	2011 APR	
(504)707,4000					1
(561)707-4683	elephone number		-Sπ.	<u> </u>	7/ 1997
Daytime 1	стернопе пинюег		173	٠,	The section
misty@lakeworthsteel.co	vm			ii.	
misty@lakeworthsteel.co	for future annual report	notification)	物学へ	y C	Marine.
	•)	

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 1 A The name of the corp	IAME Mommy & Me Consignmoration shall be:	nent, INC.		
69	PRINCIPAL OFFICE Principal street address 01 South Dixie Highway	113 No		
	est Palm Beach, FL 405			
225	100	33400		
ARTICLE III P				
	ch the corporation is organized is:			
	dren's Consignment Store, sell			
	oes,accessories,books,dvd's,beddir	ng, and small	housewares.	•
Any and all law	ful purposes.			
ARTICLE IV S The number of shares	of stock is:1000			
	NITIAL OFFICERS AND/OR DIRECTOR			
	:Misty Page President/ OFFICER	Name and Title	Daniel T. Pa	ge V.P./ OFFICER
Address:	113 North O Street	_ Address:		Street
	Lake Worth, FL 33460			<u> </u>
	.55400	-	33400	
Name and Title	: <u> </u>	Name and Title	:	
Address:		_ Address:		·
		-		
Name and Title Address:				
		-		
	EGISTERED AGENT			7.5
	la street address (P.O. Box NOT acceptable) of		nt is:	ZOII APR SECRET
Name: Address:	Misty Page	-		≥2 8 11
Addiess.	113 North O Street	-		
	Lake Worth, FL 33460	-		SS +
ARTICLE VII II	NCORPORATOR			الأبيامية ميساطيا
	ss of the Incorporator is:			mg 7
Name:	Misty Page	_		54 N
Address:	113 North O Street	- -		
	Lake Worth,FL 33460	_		Ĉu. ∨
	as registered agent to accept service of process amiliar with and accept the appointment as regi			
m it	P vs.		.3	-31-11
- 11041	Required Signature/Registered Agent		ر	31-7/
σ	Required Signature/Registered Agent			Date
I submit this docume	ent and affirm that the facts stated herein are	true. I am awaro	that the false in	formation submitted in a
document to the Depart	urtment of State constitutes a third degree felony	as provided for in	n s.817.155. F.S.	,
Λ				~
Munk	. You o			4-31-11
	Required Signature/Incorporator		_	Date
\mathcal{O}				