P/100007424/

(Requestor	's Name)
(Address)	
(Address)	
(City/State/	Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	Entity Name)
(Document	Number)
Certified Copies C	Certificates of Status
Special Instructions to Filing O	fficer:
- WH-41595	<

Office Use Only



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THAUG 18 PH 3: 55
SECRETARY OF STATE
TAIL AHASSEE IS OBION





COVER LETTER

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

SUBJECT: SEW N SHAPE INC	
(PROPOSED CORPORA Enclosed are an original and one (1) copy of the arti	icles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM: <u>Marie E Hardy</u> Name	e (Printed or typed)
4234 King Edward D	Prive Address
Orlando, Florida 320 City,	826 State & Zip
407-810-3599 Daytime T	Celephone number
marie.turner.hardy@ E-mail address: (to be use	Ogmail.com d for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 9, 2011

MARIE E HARDY 4234 KING EDWARD DRIVE ORLANDO, FL 32826

SUBJECT: SEW N SHAPE INC Ref. Number: W11000041595

We have received your document for SEW N SHAPE INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of 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) 245-6962.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 011A00018695

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

AR HULLE I	SE	W N SHAPE INC			
The name of the	corporation shall be:				
ARTICLE II	PRINCIPAL OFFICE				
	Duta almal atmant a diducas		Mailing addre	ess, if different is:	
•	117311 Eine FDM	IARI) DR	waning addit	css, il different is.	
•	0RLANDO F/ 32	826			-
-					_
ARTICLE III	PURPOSE				
	which the corporation is organized i	s:			
9	Service				
3	JEI VICE			et., =\$	
				AUG 18 ECRETAH AHASS	
ARTICLE IV	SHARES			See I	卫ン
The number of sh	nares of stock is: 500			<u>m</u> ~	
APTICI P V	INITIAL OFFICERS AND/OF	nmertope			۵,-
	Title: Owner Manc E		nd Title:	نتم	
Address:	4234 King Edward Drive			<u> </u>	_
	Orlando, Florida 32826			Su N	_
	·	 			
Name and	Title:	Name a	nd Title		
Address:		Addres	s:		
					_
			 		-
Name and	Title:	Name a	nd Title:		
Address:		Addres	s:		
					_
					_
ARTICLE VI	REGISTERED AGENT				
	lorida street address (P.O. Box NOT	acceptable) of the registe	ered agent is:		
Name:	Marie E Hardy		_		
Address:	4234 King Edward Dri				
	Orlando, Florida 3282	5			
ARTICLE VII	INCORPORATOR				
	7.1 C.1 T				
Name:	Marie E. Har 4234 King E	d4 +			
Address:	4234 King EL	WARD DR			
	OKIANAO FI	32826			
Having been nan	ned as registered agent to accept sei	vice of process for the a	bove stated corporati	ion at the place designated	in
this certificate, I d	am familiar with and accept the appo	intment as registered ago	ent and agree to act ir	n this capacity	
///	CH d			0/2/11	
	61/avry			8/3/11	_
/	Required Signature/Registe	red Agent		' D'ate	
I submit this doc	cument and affirm that the facts sta		n aware that the fals	se information submitted in	ı a
	Department of State constitutes a thir				
	M Eller vol.			0/2/11	
	11/01/0 100			8/3/11	_
	Required Signature/Inco	rnorator		/ / Date	