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From:

10/07/2013 12:22

#571 P.00

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES,
Account Number : 075350000353
Phone : (800) 221-2972
Fax Number : (888) 692-9256

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
SINDERELLA INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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Corporate Filing Menu

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MD 10/8

From:

10/07/2013 13:23

#571 P.002/003

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: SINDERELLA INC.

ARTICLE II PRINCIPAL OFFICE
Principal street address

330 FOWLER AVE
TAMPA, FL 33612

Mailing address, if different is:

330 FOWLER AVE
TAMPA, FL 33612

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: to engage in any lawful act or activity for
which corporations may be organized.

ARTICLE IV SHARES
The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ROBERT SCHERER/DIRECTOR Name and Title: _____

Address 10200 GILES ST #1026 Address: _____
LAS VEGAS, NV 89183

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: ROBERT SCHERER

Address: 330 FOWLER AVE

TAMPA, FL 33612

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ROBERT SCHERER

Address: 330 FOWLER AVE

TAMPA, FL 33612

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

Robert Scherer

Required Signature/Registered Agent

10/7/13

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.217.155, F.S.

Robert Scherer

Required Signature/Incorporator

10/7/13

Date