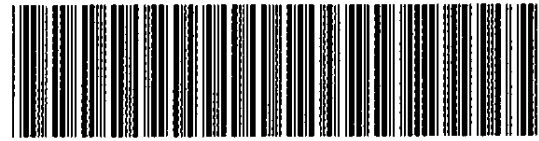


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04/08/14--01001--015 **87.50

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

B4/7/14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 APR - 7 PM 3:50

APPROVED
AND
FILED

COVER LETTER

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

SUBJECT: MS. TUTU'S @ PATRECE PLACE, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy
 \$87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: Vernica Brown
Name (Printed or typed)

P.O. Box 726
Address

Midway, FL 32343
City, State & Zip

850 251 9942
Daytime Telephone number

msstutu22@gmail.com
E-mail address: (to be used for future annual report 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: MS. TUTU'S @ PATRECE PLACE, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2450-ste 3 Springhill Rd.

P.O. Box 726

Tallahassee, Fl. 32305

Midway, Fl 32343

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any All lawful business

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Vernica Brown (P) Name and Title:

Address 2450-ste 3 Springhill Rd Address:

Tallahassee, Fl 32305

Name and Title: Name and Title:

Address Address:

Name and Title: Name and Title:

Address Address:

14 APR - 7 PM 3:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

(cont.)

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: Vernica Brown
 Address: 2450 Suite 3 Springhill Rd
Tallahassee, FL 32305

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FLORIDA

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AND
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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Vernica Brown
 Address: 2450 Suite 3 Springhill Rd
Tallahassee, FL 32305

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

Vernica Brown
 Required Signature/Registered Agent

4-7-14
 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.817.155, F.S.

Vernica Brown
 Required Signature/Incorporator

4-7-14
 Date

4-7-14

To whom it may concern,

I have no plans of revoking the
dissolution of MS. TUTU'S @ PATRECE
PLACE, INC & I Am releasing
use of name immediately.

(P12000044619)

APPROVED
AND
FILED

14 APR -7 PM 3:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Veronica Brown