

P/5000032/59

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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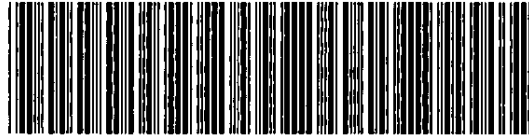
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 APR - 6 PM 12:40

04/09/15

COVER LETTER

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

SUBJECT: SWEESTAKES, 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: LAWRENCE F. CURTIN
Name (Printed or typed)

1731 AVALON AVE.
Address

FT PIERCE FL 34949
City, State & Zip

772-631-6455
Daytime Telephone number

LFC@LAWRENCEFCURTIN.NET
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: SWEESTAKES, INC.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

Mailing address, if different is:

1731 AVALON AVE
FT PIERCE
FL 34949

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO PROMOTE PRODUCTS
THAT OFFER SWEESTAKES

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ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

PRES + CHAIRMAN

Name and Title: LAWRENCE F. CURTIN Name and Title: _____

Address: 1731 AVALON AVE Address: _____
FT PIERCE
FLORIDA 34949

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

(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: LAWRENCE F CURTIN
Address: 1731 AVALON AVE
FT PIERCE FL 34949

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: LAWRENCE F. CURTIN
Address: 1731 AVALON AVE
FT PIERCE FL 34949

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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

L. F. Curtin 4-1-15
Required Signature/Registered Agent 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.

L. F. Curtin 4-1-15
Required Signature/Incorporator Date