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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN 29 2016

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## COVER LETTER

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

SUBJECT: Artistic Hippo, 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: Lynn K. Nitz  
Name (Printed or typed)  
7324 Andalusia Ave.  
Address  
New Port Richey, FL 34653  
City, State & Zip  
727-267-3396  
Daytime Telephone number  
haciendarnitz@aol.com  
E-mail address: (to be used for future annual report notification)

16 JAN 15 AM 11:51

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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)

FILED  
16 JAN 15 AM 11:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## Article I: Name

The name of the corporation shall be **Artistic Hippo, Inc.**

## Article II: Principal Office

The principal street location and mailing address is,  
**7324 Andalusia Avenue, New Port Richey, FL 34653**

## Article III: Purpose

The purpose for which the corporation is organized is to sell greeting cards and hippo related products for purchase online through a website.

## Article IV: Shares

The number of shares of stock is Fifty (50)

## Article V: Officers

1. **Lynn K. Nitz, President, Secretary**
2. **David K. Nitz, Vice President, Treasurer**  
Both officers residing at **7324 Andalusia Avenue,  
New Port Richey, FL 34653**

## Article VI: Registered Agent

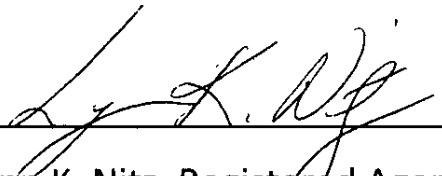
The registered agent is **Lynn K. Nitz, 7324 Andalusia Avenue,  
New Port Richey, FL 34653.**

**Article VII: Incorporator**

The Incorporator is **Lynn K. Nitz, 7324 Andalusia Avenue,  
New Port Richey, FL 34653**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

***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 of registered agent and agree to act in this capacity.***

  
\_\_\_\_\_  
Lynn K. Nitz, Registered Agent

1-12-16  
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.***

  
\_\_\_\_\_  
Lynn K. Nitz, Incorporator

1-12-16  
Date

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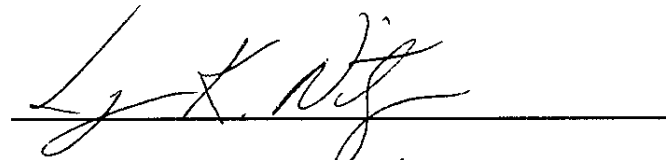
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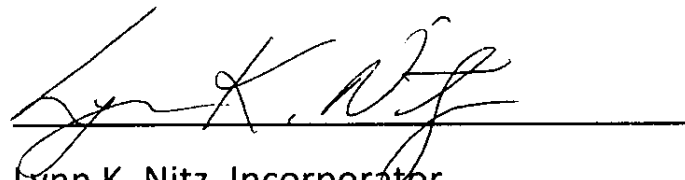


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1-12-16

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