SIGNATURE

DOCUMENT # P9400039817 1. Entity Name STRICTLY STARTERS, INC.							Jan 31, 2001 8:00 am Secretary of State 01-31-2001 90020 040 ***150.00				
•	ce of Business	Mailing	Mailing Address				-				
4075 LB MCLEOD STE F ORLANDO FL 32811 US		STE F	ORLANDO FL 32811				908911				
2. Principal F	Place of Business	3. Mailir	3. Mailing Address								
Suite, Apt.	#, etc.	Suite,	Suite, Apt. #, etc.					DO NOT WRITE	IN THIS SPACE		
City & Stat	e	City 8	City & State ,			4.	FEI Number	59-3255542		Applied For Not Applicabl	le
Zip	Country 6. Name and Address of C	Zip	,			5.	Certificate of	Status Desired	□ \$8.75 Fee Req	Additional uired	7
8. The above	Signature, Gar of primad harre of region	ment for the purpose Floyd D. ad agent and title if applications.	Perry,	Pr E: Registered	City ed office of	5238 Orland registered age ent Ja ure required when re	Cypre Cypre Cypre Co, gent, or both,	s Not Acceptable) ss Creek	FL Zip 0 3.2	Code B.1.1	
Tax filing i	pration is eligible to satisfy its Interequirement and elects to do so. ria on back)	_ ,	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of St			550.00	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees				
11.		S AND DIRECTOR		12.		ΑC	DITIONS/CH	HANGES TO OFFIC	ERS AND DIRECT]_
NAME STREET ADDRESS CITY-ST-ZIP	S PERRY, ELIZABETH S 5238 CYRESS CREEK DR ORLANDO FL					Cypres	F Change □ Ad ress Creek Drive				E034 (10/
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Dele PERRY, FLOYD D JR. 5 5238 CYPRESS CREEK DR. ORLANDO FL								☐ Chang	ge 🔲 Addition	CR2
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete -		NAME STREE	TITLE NAME STREET ADDRESS CITY-ST-ZIP		• •		☐ Chang	ge 🗌 Addition	1	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		ET ADORESS ST-ZIP				☐ Chang	e 🔲 Addition	1
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete		T ADDRESS ST-ZIP				☐ Chang	e 🔲 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete		T ADDRESS ST-ZIP				☐ Chang	e	
13. I hereby of indicated of the corp changed,	ertify that the information supplie on this report or supplemental re poration or the receiver or truste or on an axaonin en with a red	ed with this filing de eport is true and ac rempowered to ex hess, with all other	pes not qualify for curate and that recute this report like empowered.	r the exen ny signati as require	nption stature shall had by Cha	ed in Section ave the same I pter 607, Flori	119.07(3)(i), l egal effect a da Statutes; a	Florida Statutes. I fusion of the state of t	urther certify that th th; that I am an offic appears in Block 1	e information cer or director or Block 12 if	

Floyd D. Perry

January 8th, 2001

Daytime Phone #