P96000083929

TRANSMITTAL LETTER

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

Enclosed is an originator:	i and one (1) c	opy of the articles o	of incorporation a	and a check	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Cop	\$131.25 Filing Fee, Certified Copy & Certificate		
FROM:	Tamara L. Moore Name (printed or typed)		96 OCT SECRET TALLAN		
	131 Yacht Club Way # 306 Address			OT -8 AM	
	// C	1X0, 7/ 334 ity, State & Zip	62	F STATE FLORIDA	U
		547-0743 e Telephone number			

NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Comeaux's Candies, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

131 Yackt Club Way #306 Hypoluxo, 71 33462 SECULIARIST TO SECULIARIST SECURIARIST SEC

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One Housand Cl, 500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Tamara L. Moore 131 Yacht Club Way # 306 Hypoluxo, 71 33462

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Tamara L. Moure
131 Yacht Club Way #306
Hypoloxo, 71 33462

The und	ersigned in	corporator(s) has	(have) executed these Articles	s of Incorporation this
6	_day of _	June	.19_96	
(An addi	tional artic	le must be added	if an effective date is requeste	ed.)
	_	Janon	Ly More	_
			Signature	
			Signature	
	_		Signature	

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES. THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	Comeaux's Cardies	INC.
2. The name and address of the regis	stered agent and office is:	
Tama	ra L. Moore	ALLANS SECOND
/31 Va (P.O. Bo	CL+ Club Way # 306 x or Mail Drop Box NOT ACCEPTABLE)	
_ Нуро!	(CITY/STATE/ZIP) 33462	: 10 CRIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I'vereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Tanaral Man 6-6-96 (SIGNATURE) (DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314