

P96000092359

TRANSMITTAL LETTER

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

EFFECTIVE DATE
11-10-90

SUBJECT: HEAVENLY TREATS, INC.
(Proposed corporate name - must include suffix)

400001982264--8
-10/22/96--01037--015
****122.50 ****122.50

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

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate

\$122.50
Filing Fee
& Certified Copy

\$131.25
Filing Fee,
Certified Copy
& Certificate

FROM: JULIE A. SCHOONOVER
Name (printed or typed)

P.O. Box 916053
Address

LONGWOOD, FL 32791
City, State & Zip

407-788-6771
Daytime Telephone number

FILED
56 NOV 12 AM 8:43
STATE
TALLAHASSEE, FLORIDA

W96-22842

NOV 12 1990

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



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

October 28, 1996

SUE A. SCHOONOVER
P.O. BOX 916053
LONGWOOD, FL 32791

SUBJECT: HEAVENLY TREATS, INC.
Ref. Number: W96000022842

We have received your document for HEAVENLY TREATS, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

The registered agent and registered office listed in your articles of incorporation must be consistent throughout the document.

A post office box is not an acceptable address for the registered agent.

The effective date is not acceptable since it is not within five working days of the date of receipt.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6928.

Agnes Lunt
Corporate Specialist

Letter Number: 196A00049540

FILED

96 NOV 12 AM 8:48

CLERK OF THE CIRCUIT COURT
JUDICIAL CIRCUIT IN AND FOR
THE COUNTY OF ORANGE, FLORIDA

ARTICLES OF INCORPORATION
HEAVENLY TREATS, INC.

EFFECTIVE DATE
11-6-96

ARTICLE I

The name of the corporation shall be Heavenly Treats, Inc.
The date of incorporation shall be November 6, 1996.

ARTICLE II

The principal place of business shall be:

124 Ledbury Drive
Longwood, FL 32779

The mailing address of this corporation is:

P. O. Box 916053
Longwood, FL 32791

ARTICLE III

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

One Hundred (100) Shares
Cost: \$1.00 per Share

The shares of stock are to be split 50% each by the Incorporators
to these Articles of Incorporation.

ARTICLE IV

The name and address of the initial registered agent is:

Sue A. Schoonover
124 Ledbury Drive
Longwood, FL 32779

ARTICLE V

The names and street addresses of the Incorporators to these Articles of Incorporation are:

Sue A. Schoonover	124 Ledbury Drive, Longwood, FL 32779
Donald C. Schoonover	124 Ledbury Drive, Longwood, FL 32779

The undersigned incorporators have executed these Articles of Incorporation this 6 day of NOVEMBER, 1996.

Sue A. Schoonover

Donald C. Schoonover

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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: HEAVENLY TREATS, INC.

2. The name and address of the registered agent and office is:

SUE A. SCHOONOVER
(Name)
124 LEDBURY DRIVE
(P.O. Box not acceptable)
LONGWOOD, FL 32779
(City/State/Zip)

FILED
96 NOV 12 AM 8:18
STATE OF FLORIDA
TALLAHASSEE

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 hereby 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.

Sue A. Schoonover
(Signature)

P96000092359

April 8, 1997

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

SECRET
91 APR 10 PM 2:00
FBI

Dear Sir/Madam:

Please find enclosed Articles of Dissolution for my company, Heavenly Treats, Inc. Also, enclosed is a check in the amount of \$43.75, for filing fee and status certificate.

The document number of this corporation is P96000092359.

If you need additional information, I can be reached at (407) 774-9499 or P. O. Box 916053, Longwood, FL 32791. Thank you.

Sincerely,

Sue A. Schoonover

Sue A. Schoonover

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-04/10/97--01051--012
*****43.75 *****43.75

Voldis

TLL APR 14 1997

ARTICLES OF DISSOLUTION

97 APR 10 PM 2:00
SECRETARY OF STATE
FLORIDA

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation is: HEAVENLY TREATS, INC.

SECOND: The date dissolution was authorized: APRIL 1, 1997

THIRD: Adoption of Dissolution (CHECK ONE)

- Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
- Dissolution was approved by vote of the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

_____ (voting group)

Signed this 8 day of APRIL, 19 97.

Signature *Sue A. Schoonover*
(By the Chairman or Vice Chairman of the Board, President, or other officer)

SUE A. SCHOONOVER
(Typed or printed name)

PRESIDENT
(Title)

P96000092359

April 8, 1997

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

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Sincerely,

Sue A. Schoonover
Sue A. Schoonover

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TL APR 14 1997

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Dissolution was approved by vote of the shareholders through voting groups.

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_____ (voting group)

Signed this 8 day of APRIL, 19 97.

Signature Sue A. Schoonover
(By the Chairman or Vice Chairman of the Board, President, or other officer)

SUE A SCHOONOVER
(Typed or printed name)

PRESIDENT
(Title)