

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870
Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
TOLL FREE No. 1-800-342-8062
FAX (904) 222-1222

NAME _____
FIRM _____
ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

REQUEST TAKEN CONFIRMED APPROVED

DATE _____

TIME _____ CK No. _____

BY [Signature]

WALK-IN 12/31/12 [Signature]
Will Pick Up 12/31

RE: Dreamscape Custom Baths, Inc.

	C.C. FEE.	DISBURSED
<input checked="" type="checkbox"/> Capital Express SM		
<input type="checkbox"/> Art. of Inc. File		
<input type="checkbox"/> Corp. Record Search		
<input type="checkbox"/> Ltd. Partnership File		
<input type="checkbox"/> Foreign Corp. File		
<input checked="" type="checkbox"/> Cert. Copy(s)		
<input type="checkbox"/> Art. of Amend. File		
<input type="checkbox"/> Dissolution/Withdrawal		
<input type="checkbox"/> C U S-		
<input type="checkbox"/> Fictitious Name File		
Name Reservation	12/31/95-01064-031	
Annual Report/Reinstatement	****122.50 ****122.50	
Reg. Agent Service		
Document Filing		
Corporate Kit		
Vehicle Search		
Driving Record		
Document Retrieval		
UCC 1 or 3 File		
UCC 11 Search		
UCC 11 Retrieval		
File No.'s. Copies		
Courier Service		
Shipping/Handling		
Phone ()		
Top Priority		
Express Mail Prep.		
FAX () pgs.		
SUBTOTALS		

FEE.....	\$
DISBURSED.....	\$
SURCHARGE.....	\$
TAX on corporate supplies.....	\$
SUBTOTAL	\$
PREPAID.....	\$
BALANCE DUE	\$

Please remit invoice number with payment
TERMS: NET 10 DAYS FROM INVOICE DATE
1 1/2% per month on Past Due Amounts
Past 30 Days, 18% per Annum.

THANK YOU
from
Your Capital Connection

ARTICLES OF INCORPORATION

of

DREAMSCAPE CUSTOM BATHS, INC.

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

DREAMSCAPE CUSTOM BATHS, INC.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue One Thousand (1000) shares .001 Dollar(s) (\$.001) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

**ANN T. FRANK
2124 Airport Road South
Suite 102
Naples, FL 34112**

The principal office, if known, or the mailing address of the corporation is:

**844 104th Avenue N.
Naples, FL**

FILED
96 DEC 31 PM 2:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have THREE (3) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

ROBERT A. ACOSTA
104th Avenue N.
Naples, FL 34108

BRENDA ACOSTA
104th Avenue N.
Naples, FL 34108

DONNA ACOSTA
104th Avenue N.
Naples, FL 34108

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

PETER B. FRANK
2124 Airport Road South
Suite 102
Naples, FL 34112

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 27 day of December, 1996.

Peter B. Frank (Seal)

STATE OF FLORIDA
COUNTY OF COLLIER

Before me a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared:

Peter B. Frank
PETER B. FRANK

X Personally known to me
Form of Identification

Known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me

that they executed these Articles of Incorporation, that I relied upon the form X of identification of the above named person _____ as indicated opposite each name, and that an oath was taken.



MAUREEN L BIBB
My Commission CC428342
Expires Jan 29 1989
Bonded by ANS
800-852-5878

Notary Rubber Stamp Seal

Witness my hand and official seal in the county and State last aforesaid this 27 day of December, 1996.

Maureen L. Bibb
Notary Signature

MAUREEN L. Bibb
Printed Notary Signature

CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT

of

DREAMSCAPE CUSTOM BATHS, INC.

FILED
96 DEC 31 PM 2:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation at

2124 Airport Road South
Suite 102
Naples, Florida 34112

has named **Ann T. Frank, Esquire**

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

Ann T. Frank
(registered agent)