

OFFICE USE ONLY

Swanson Carpet Co.
P.O. Box 2294
Winter Park, FL 32790

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

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☐ Walk in ☐ Will Wait ☐ Pick up time _____

☐ Certified Copy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
97 APR 11 2 09 PM
TALLAHASSEE, FLORIDA

Examiner's Initials

[Signature]
APR 15 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

April 7, 1997

SWANSON CARPET CO.
P.O. BOX 2294
WINTER PARK, FL 32790

SUBJECT: CUDDLECARE, INC.
Ref. Number: W97000007986

We have received your document for CUDDLECARE, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$.

The corporate fees are as follows:

CORPORATIONS FILING FEES

Profit and NonProfit
Florida & Foreign Corp.

Filing Fees	\$35.
Registered Agent Designation	\$35.
Certified Copy	\$52.50
Total Fee Due	\$122.50

If you have any questions concerning the filing of your document, please call (904) 487-6933.

Dana Calloway
Document Specialist

Letter Number: 797A00017300

ARTICLES OF INCORPORATION
OF
CUDDLECARE, INC.

Article I - Name

The name of this corporation is CUDDLECARE, INC.

Article II - Purpose

This corporation is organized for the purpose of trans-
acting any or all lawful business.

Article III - Capital Stock

This corporation is authorized to issue 1000 shares of no
par value common stock.

Article IV - Initial Registered Office and Agent

The initial mailing address, principal office and
registered office of this corporation is 1801 LEE ROAD, #255,
WINTER PARK, FL 32789 and the name of the initial registered agent
of this corporation at that address is JAMES SWANSON.

Article V - Initial Board of Directors

This corporation shall have two directors initially. The
number of directors may be either increased or diminished from
time to time by the bylaws but shall never be less than one.
The names and addresses of the initial directors of this
corporation are:

JAMES SWANSON
981 Mayfield Avenue
Winter Park, FL 32789

ANDREW SWANSON
981 Mayfield Avenue
Winter Park, FL 32789

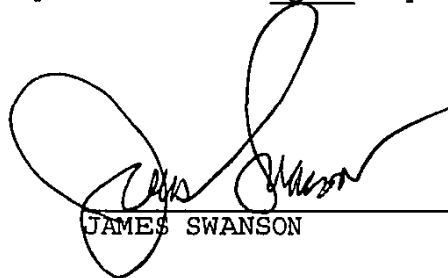
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TALLAHASSEE, FLORIDA

Article VI - Incorporator

The name and address of the person signing these Articles of Incorporation is:

JAMES SWANSON
981 Mayfield Avenue
Winter Park, FL 32789

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this 16th day of ~~February~~, 1997.
March



JAMES SWANSON

STATE OF Florida
COUNTY OF Orange

BEFORE ME, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared JAMES SWANSON, known to me and known by me to be the person who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid this 16th day of ~~February~~, 1997.
MARCH

Print, type or stamp name of Notary Public
Personally known ☒ OR Produced I. D. ☐
Type and number of I. D. produced:


Notary Public
My Commission Expires:



PAULA D MILLER
My Commission CC200262
Expires Jul. 19, 1997
Bonded by AND
800-852-6876

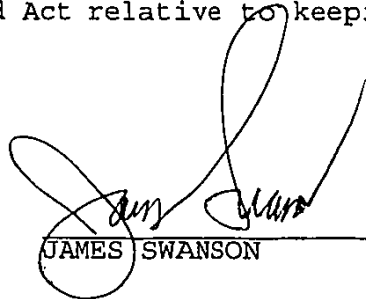
CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE
SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT
UPON WHOM PROCESS MAY BE SERVED

In pursuance of Chapter 48.091, Florida Statutes, the
following is submitted in compliance with said Act:

First--That CUDDLECARE, INC. desiring to organize under the
laws of the State of Florida with its principal office, as
located at 1801 LEE ROAD, #255, County of Orange, State of
Florida, has named JAMES SWANSON,

as its agent to accept service
of process within this State.

Having been named to accept service of process for the
above-stated corporation, at place designated in this certif-
icate, I hereby accept to act in this capacity, and agree to
comply with the provision of said Act relative to keeping
open said office.



JAMES SWANSON

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TALLAHASSEE, FLORIDA