

P97000004063
TRANSMITTAL LETTER

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

SUBJECT: Heart to Heart Cards, Inc.
(Proposed corporate name - must include suffix)

800002166568--4
-05/06/97--01006--003
*****78.75 *****78.75

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

ADDITIONAL COPY REQUIRED

FROM:

DOROTHY BOWERS
Name (Printed or typed)

4627- Grovecrest Dr.
Address

Lakeland, FL 33813
City, State & Zip

(941) 544-4209
Daytime Telephone number

FILED
97 MAY -5 PM 3:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AL MAY - 9 1997

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

ARTICLES OF INCORPORATION

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

FILED
97 MAY -5 PM 3:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Heart to Heart Cards Inc.

ARTICLE II PRINCIPAL OFFICE

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

4627-Grovecrest Dr.

ARTICLE III SHARES

Lakeland, Fl 33813
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 (One Hundred)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

DOROTHY BOWERS
4627-Grovecrest Dr

ARTICLE V INCORPORATOR

Lakeland, Fl 33813
The name and address of the incorporator to these Articles of Incorporation are:

DOROTHY BOWERS
4627-Grovecrest Dr.
Lakeland, Fl 33813

Dorothy Bowers
Signature/Incorporator

4-29-97
Date

(An additional article must be added if an effective date is requested.)

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

Dorothy Bowers
Signature/Registered Agent

4-29-97
Date