

P970000.48000

TRANSMITTAL LETTER

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

1 00002192821--2  
-05/28/97--01029--002  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT : FANTASY STORE, INC.  
(Proposed corporate name - must include suffix)

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

☒ \$78.50  
Filing Fee & Certificate

☐ \$122.50  
Filing Fee & Certified Copy

FROM : JOHN ADAM  
Name

7101 9TH AVE NORTH  
Street Address

ST. PETERSBURG FL 33710  
City, State & zip

(813) 824 - 2695  
Daytime Phone Number

FILED  
97 MAY 28 PM 12:54  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Dmc  
5/30/97

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

# ARTICLES OF INCORPORATION

FILED

97 MAY 28 PM 12:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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 :

***FANTASY STORE, INC.***

## ARTICLE II PRINCIPAL OFFICE

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

***7101 9TH AVE NORTH  
ST. PETERSBURG FL 33710***

## ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is : **(1000) one thousand shares of one dollar (\$1.00) par value common stock, which shall be designated "COMMON STOCK".**

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is :

***JOHN ADAM  
7101 9TH AVE NORTH  
ST. PETERSBURG FL 33710***

**ARTICLE V INCORPORATOR(S)**

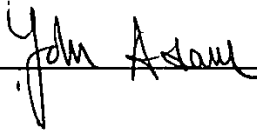
The name(s) and street address(es) of the incorporator(s) to theses Articles of Incorporation is (are) :

**JOHN ADAM  
7101 9TH AVE NORTH  
ST. PETERSBURG FL 33710**

***President***

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this

23 th day of MAY 1997

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

# 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 :

FANTASY STORE, INC.

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TALLAHASSEE FLORIDA  
SECRETARY OF STATE

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

JOHN ADAM

(Name)

7101 9TH AVE NORTH

(P.O.BOX "not" accepted)

ST. PETERSBURG FL 33710

(City/State/Zip)

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the 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.*

John Adam  
Signature

5/23/97  
Date