# P97000080378

# TRANSMITTAL LETTER

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

CUR IECT.		My Sewii	ng Room, Inc.				
SUBJECT:	(Proposed corporate name - must include suffix)						
				9000022 -09/08/ ****12	286( '970:  2.50	309 1059011 ****122.5	6 0
Enclosed is an	n original a	ind one (1) cop	y of the articles of	incorporation an	id a ch	eck	
for : \$70 Filing	0.00 Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate			
	FROM:	Karron Williams			-1,,		
PROIVI.		Name (printed or typed)			SEC!	97	
		_2067 S.	Tamiami Trail Address		Aliassee,	FILE SEP 17	
		Venic	Venice, FL 34293		E		
		City, State & Zip		FLORID/	e 35		
		941	-485-9517		عسد	UI .	
		Dayti	ne Telephone number				

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

ne 9/17/97



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

September 9, 1997

KARRON WILLIAMS 2067 S. TAMIAMI TRAIL VENICE, FL 34293

SUBJECT: MY SEWING ROOM, INC. Ref. Number: W97000020696

We have received your document for MY SEWING ROOM, 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 an address and telephone number where you can be reached during working hours.

The registered agent and street address must be consistent wherever it appears in your document.

Please return the original and one copy of 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 (850) 487-6067.

Neysa Culligan Document Specialist

Letter Number: 097A00044794

### FILED

## ARTICLES OF INCORPORATION 97 SEP 17 AM 8: 35

SECHLIA (1 UF 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:

My Sewing Room, Inc.

#### ARTICLE II PRINCIPAL OFFICE

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

2067 S. Tamiami Trail Venice, FL 34293

#### ARTICLE III SHARES

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

100

#### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Joyce Crawn 2067 S. Tamiami Trail Venice, FL 34293

#### ARTICLE V INCORPORATOR(S)

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

Karron Williams Joyce Crawn 1684 Valley Drive 1422 Gleneag

1684 Valley Drive 1422 Gleneagles Drive Venice, FL 34292 Venice, FL 34292

Vernon Crawn
1422 Gleneagles Drive
Venice, FL 34292
Gerald Williams
1684 Valley Drive
Venice, FL 34292

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

4th day of September 19 97.

Signature

Articles of Incorporation Filing Fee - \$35

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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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	My Sewing Room, In of the corporation is:	nc.
2.	The name	and address of the registered agent and office is:	<b>9</b>
	_	Joyce Crawn (Name)	7 SEP
		2067 S. Tamiami Trail	NAME OF THE PARTY
		(P.O. Box <u>not</u> acceptable) Venice, FL 34293	AN 8: 35
	-	(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 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.

(Signature) 9-4-97 (Date)