2970 PANGTALEJAZZZZ

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

Bare Necessities and More,
(Proposed corporate name - must include suffix)

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: Annette Enoruwa
Name (Printed or typed)

(954)-755-4198

Daytime Telephone number

LFt. hera U.M.

That I wid.

Write in City + Zip-art. 4.

She has myst it has a?

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

ARTICLES OF INCORPORATION

NAME

The name of the corporation shall be:

ARTICLE I

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

	•
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of this corporation shall be:	
dd35	, Westview DR# 424
Coral	Springs FL 33076
The number of shares of stock that this corporation is authorized to have outstanding at any one time is 2	
/0010	CT 27
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: Annette Choruse Chor	
The name and Florida street address of the initial registered agent are:	
	Hone the chord of the
	1935 WEC (1100 10K. 124
ARTICLE V INCORPORATOR	Coral Springs, FL 33076
The name and address of the incorporator to these Articles of Incorporation are:	
F	Annette Enorywa
Ċ	1022 Westwaw ORH 424
	Coral Springs FL. 33076
Smoth Enouna	10-13-97
Signature/Incorporator	Date

Bare Mecessities and More, Inc.

(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

Signature/Registered Agent Date