

CHARLENE D. KELLEY, P.A.

*Attorney at Law*



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December 12, 1997

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

**F97000106596**

600002376226-7  
-12/18/97-01017-011  
\*\*\*\*122.50 \*\*\*\*122.50

**SUBJECT: SPOON'S NURSERY, INCORPORATED**

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

**FROM: CHARLENE D. KELLEY, P.A.**  
36 N. Park Avenue  
Apopka, FL 32703  
Telephone: (407) 889-3933

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
97 DEC 18 AM 10:55

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DIVISION OF CORPORATIONS  
97 DEC 18 AM 10:55

**ARTICLES OF INCORPORATION  
OF  
SPOON'S NURSERY, INCORPORATED**

*The undersigned incorporator, 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:

**SPOON'S NURSERY, INCORPORATED**

**ARTICLE II-PRINCIPAL OFFICE**

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

**247 N. Christiana Ave.  
Apopka, FL 32703**

**ARTICLE III-SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: **7,500**

**ARTICLE IV-INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

**Charlene D. Kelley, P.A.  
36 N. Park Ave.  
Apopka, FL 32703**

**ARTICLE V-INCORPORATOR**

The name and address of the the Incorporator to these Articles of Incorporation are:

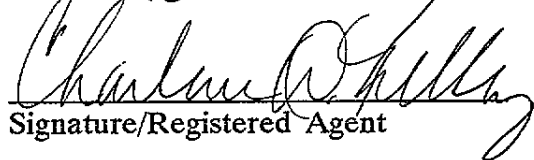
**Charlene D. Kelley, P.A.  
36 N. Park Ave.  
Apopka, FL 32703**

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 12 day of December, 1997.



*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 fo my duties, and I am familiar with and accept the obligations of my position as registered agent.*

DATED: December 12, 1997

  
Signature/Registered Agent

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