TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327

SUBJECT: Shabby Chic By Connie Paula, Inc.
(Proposed corporate name - must include suffix)
700002527617
-05/18/98-01096-

Tallahassee, FL 32314

Enclosed is an original ar	nd one(1) copy of the articl	es 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 CO	PY REQUIRED	
FROM: Paula A. Dhillips Name (Printed or typed)				
304 5. E. 24th 5t. Address				
Cape Coval, Fl. 33996-4323 City, State & Zip				
941-458-6756 Daytime Telephone number		IB AN		

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

TA-5/20/98

ARTICLES OF INCORPORATION

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

ARTICLE I NAME	
The name of the corporation shall be:	
Shabby Chic By Connie + Po	aula, Inc.
ARTICLE II PRINCIPAL OFFICE	TS =
The principal place of business and mailing address of this corpor	oration shall be:
3045.2.2445+. Cape Coral, F1.33990	
ARTICLE III SHARES	-
The number of shares of stock that this corporation is authorized	to have outstanding at any one time is:
500 - 3 5 7 7 7	.* - -
ARTICLE IV INITIAL REGISTERED AGENT AND	D STREET ADDRESS
The name and Florida street address of the initial registered agent	t are:
Paula A. Phillips	2244
3045.8. 24th 5t., Cape Coral, F1.	33940
ARTICLE V INCORPORATOR	
The <u>name and address</u> of the incorporator to these Articles of In	ncorporation are:
ConniE J. Vukovich	
2716 DAHERSON CRT	-
2716 PAHERSON CAT St. JAMES CITY Fl. 33956	
Consie Vukovico	5-15-98
Signature/Incorporator	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

Vaula a. Whillips	5-15-98
Signature/Registered Agent	Date