

P98000066125

TRANSMITTAL LETTER

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

FILED
98 JUL 27 PM 2:32
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

SUBJECT: Judy's Classy Needle, Inc.
(Proposed corporate name - must include suffix)

400002599794--7
-07/27/98--01125--005
****131.25 ****131.25

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: Judyth L. Cox
Name (Printed or typed)

6107 Wigmore Ln - Unit E
Address

Kingstowne, VA 22315-5216
City, State & Zip

703/971-2126
Daytime Telephone number

After 8/15/98:

2337B 1st Ave.
Fernandina Beach, FL 32034

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

202-200-4444
8/28/98

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be "Judy's Classy Needle, Inc."

ARTICLE II PRINCIPAL OFFICE

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

316-C Centre St.
Fernandina Beach, Florida 32034

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

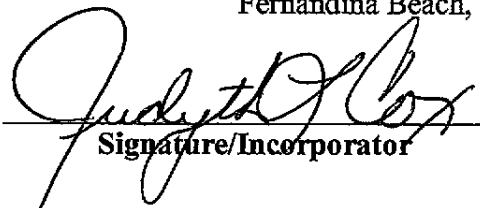
The name and Florida street address of the initial registered agent are:

Judyth L. Cox
2337B 1st Ave.
Fernandina Beach, Florida 32034

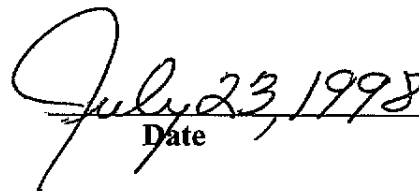
ARTICLE V INCORPORATOR

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

Judyth L. Cox
2337B 1st Ave.
Fernandina Beach, Florida 32034

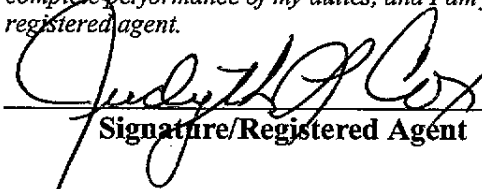


Signature/Incorporator

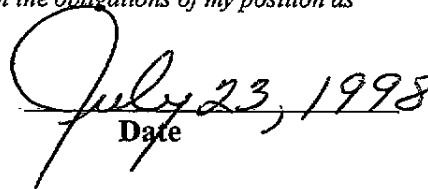


Date

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

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TALLAHASSEE, FLORIDA

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