

TRANSMITTAL LETTER

P98000080938

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

600002642216--6
-09/17/98--01005--010
*****78.75 *****78.75

SUBJECT: JUDY ANN PRODUCTS CORP.
(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: JUDY KING
Name (Printed or typed)

90 CREST PLACE
Address

DESTIN, FL 32541
City, State & Zip

850 650-1549
Daytime Telephone number

98 SEP 14 AM 9:19
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Rec 9/14

9-18-98
ANN

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

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 ANN PRODUCTS CORP.

ARTICLE II PRINCIPAL OFFICE

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

90 CREST PLACE
DESTIN, FL 32541

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:

JUDY KING
90 CREST PLACE
DESTIN, FL 32541

ARTICLE V INCORPORATOR

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

JUDY KING
90 CREST PLACE
DESTIN, FL 32541

Judy King
Signature/Incorporator

9-10-98
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

Judy King
Signature/Registered Agent

9-10-98
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA