

P990000007147

TRANSMITTAL LETTER

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

500002748405--9
-01/20/99--01097--001
*****78.75 *****78.75

SUBJECT: CUDDLEFRAME USA INC
(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

FILED
99 JAN 20 PM 2:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FROM: MR DAVID JAMES COOPER
Name (printed or typed)

17595 S TAMiami TRAIL #23
Address

FORT MYERS, FL 33908
City, State & Zip

941 437 7888
Daytime Telephone Number

Dmb
1-25-99

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

FILED

99 JAN 20 PM 2:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

The undersigned incorporator(s), 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:

CUDDLEFRAME USA INC

ARTICLE II PRINCIPAL OFFICE

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

17595 S TAMiami TRAIL #23
FORTMEYERS, FL. 33908

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 address of the initial registered agent is:

MR DAVID JAMES COOPER
17595 S TAMiami TRAIL #23
FORTMEYERS, FL, 33908

ARTICLE V INCORPORATOR(S)

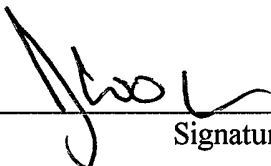
See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

MR DAVID JAMES COOPER
790 101 ST AVENUE NTH
NAPLES
FLORIDA 34108

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this
18 day of JANUARY, 1999.

(An additional article must be added if an effective date is requested.)



Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

FILED

99 JAN 20 PM 2:52

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE
REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.**

1. The name of the corporation is: CUDDLEFRAME USA INC

2. The name and address of the registered agent and office is:

MR DAVID JAMES

(Name)

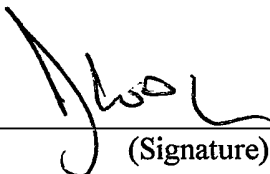
17959 S TAMiami TRAIL #23

(P.O. Box or Mail Drop Box NOT Acceptable)

FORTMEYERS, FL, 33908

(City/State/Zip)

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)

01/18/99

(Date)