79900018073

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

Tallahassee, FL 3231	4			
SUBJECT:	SCRUB Mom. Com (Proposed corpor	ate name - must include suff	ix)	
		50	0002784 -02/23/990 *****78.75	125—8 1035007 *****78.75
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:				
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	Shawn Bur Name (Pr	rinted or typed)	· · · <u>-</u>	
	P.O. Box 33	Address		
	Atlantic R City,	State & Zip	99 FEB 23	
Daytime Telephone number				

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

ARTICLES OF INCORPORATION.

ARTICLE I

The name of the corporation shall be "ScrubMom. Com, Inc.".

ARTICLE II

The principal place of business of this corporation shall be 506A Ocean Front, Neptune Beach, Florida, 32266 and the mailing address shall be P.O. Box 331126, Atlantic Beach, Florida, 32233.

ARTICLE III

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one thousand (1,000) shares at a par value of one dollar (\$1.00) per share.

ARTICLE IV

The initial registered agent shall be Shawn Burke with the Florida street address as 506A Ocean Front, Neptune Beach, Florida, 32266.

ARTICLE V

The name and mailing address of the Incorporator shall be Shawn Burke at P.O. Box 331126, Atlantic Beach, Florida, 32233.

Having been names 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.