# TRANSMITTAL LETTER

Department of State
Division of Corporations

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# P.O. Box 6327 Tallahassee, FL 32314 YEN Your-Every-Need, Inc (Proposed corporate name - must include suffix) SUBJECT: 600002869326---05/10/99--01093--019 \*\*\*\*\*87.50 \*\*\*\*\*87.50 Enclosed is an original and one(1) copy of the articles of incorporation and a check for: \$78.75 \$87.50 □ \$70.00 \$78.75 Filing Fee, Filing Fee Filing Fee Filing Fee & Certified Copy Certified Copy & Certificate of Status & Certificate of Status ADDITIONAL COPY REQUIRED

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

#### ARTICLES OF INCORPORATION

**OF** 

## YEN Your-Every-Need, Inc.

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation:

#### ARTICLE I

The name of this cooperation shall be YEN Your-Every-Need, Inc.

#### ARTICLE II

The general nature of the business to be transacted by this corporation shall be to engage in any and all lawful activities or business permitted under the laws of the United States and Florida; including specifically printing, marketing, and web design.

#### ARTICLE III

The total number of shares of capital stock that this corporation is authorized to have outstanding shall be 100,000 having a par value of \$1.00 per share.

# ARTICLE IV

This corporation shall exist perpetually.

## ARTICLE Y

The principal place of business and mailing address of this corporation shall be 11362 State Road 84, Davie, FL 33325.

#### ARTICLE VI

The name and address of the Initial Registered Agent and Office shall Te Stephanie R. Algie, 11362 State Road 84, Davie, FL 33325.

## ARTICLE VII

This corporation shall have two directors initially. The number of directors may be either increased or decreased from time to time by an amendment of the bylaws of the corporation in the manner provided by law, but shall never be less than two. The names and addresses of the initial directors of this corporation are:

<u>NAME</u>	<u>ADDRESS</u>	TITLE
Stephanie R. Algie	11362 State Road 84 Davie, FL 33325	President
Renzo Ganassini	11362 State Road 84 Davie, FL 33325	Vice President

# ARTICLE VIII

The names and addresses of the incorporators signing these Articles of Incorporation are:

<u>NAME</u>	ADDRESS
Stephanie R. Algie	11362 State Road 84 Davie, FL 33325
Renzo Ganassini	11362 State Road 84 Davie, FL 33325

#### ARTICLE IX

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned incorporators have executed these Articles of Incorporation, this \_\_\_\_\_ day of May, 1999. Signed , Sealed and Delivered n the Presence of: STATE OF FLORIDA SS COUNTY OF BROWARD BEFORE ME, the undersigned authority, personally appeared STEPHANIE R. ALGIE, who is \_\_\_\_\_ personally known to me, or \_\_\_\_\_ provided proper and who, upon identification [Type: \_ being first duly sworn according to law, deposes and says that she executed the foregoing Articles of Incorporation and they are true and correct to the best of her knowledge and belief. IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of my office in the County and State last aforementioned this \_\_\_\_\_ day of May, 1999. **Caroline Levy** MY COMMISSION # CC598699 EXPIRES November 8, 2000 BONDED THRU TROY FAIN INSURANCE, INC. My Commission Expires: STATE OF FLORIDA COUNTY OF BROWARD BEFORE ME, the undersigned authority, personally appeared RENZO GANAZZINI, who is \_\_\_\_\_ personally known to me, or \_\_\_\_ \_\_ provided proper ] and who, upon identification [Type:

being first duly sworn according to law, deposes and says that he executed the foregoing Articles of Incorporation and they are true and correct to the best of his knowledge and belief.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of my office in the County and State last aforementioned this \_\_\_\_\_ day of May, 1999.

Caroline Levy
MY COMMISSION # CC598699 EXPIRES
November 8, 2000
BONDED THRU TRBY FAIN INSURANCE, INC.

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(Print Name as Commissioned)

My Commission Expires:

# CERTIFICATE DESIGNATING AGENT UPON WHOM PROCESS MAY BE SERVED AND THE PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THE STATE OF FLORIDA

Pursuant to Florida Statute §48.091 and §607.051, the following is submitted in compliance therewith:

YEN Your-Every-Need, Inc. desiring to organize under the laws of the State of Florida with its initial registered office as indicated in the Articles of Incorporation, at 11362 State Road 84, City of Davie, County of Broward, State of Florida, has named Stephanie R. Algie as its registered agent to accept service of process within this state.

STEPHANIE R. ALGIE, President

Date: 5 4 99

# ACKNOWLEDGEMENT AND ACCEPTANCE:

Having been named as the registered agent for the above corporation for the purpose of accepting service of process at the registered office designated in this certificate, I hereby accept such appointment and acknowledge that I am familiar with and accept the obligations and responsibilities of such office as provided for in Florida Statute §607.0505.

STEPHANIE R. ALGIE, Registered Ag

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