## P9900053138

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

SUBJECT:	me For You (Proposed compon	Tnc., ate name - must include suf	fix)	<b>.</b> ···
			300002899 -06/09/99 *****78.79	
Enclosed is an original	and one(1) copy of the articles	s 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 CO	PY REQUIRED	
FROM: _	Robin Maier Name (P)	rinted or typed)		
	P.O. BOX 27	2402 Address	<del> </del>	
	Tampa F City,	State & Zip	<u>088-2402</u> Zm 3	9
	813 - 265 - 05 Daytime T	Q 8 Telephone number	CRETARY OF STALLAHASSEE, FLOR	FILED

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:

Time For You, Inc.

ARTICLE II PRINCIPAL OFFICE

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

P.O. Box 272402 Tampa, FL 33688-2702

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Abin Maier 1.0, Bx 272402

Tompa FL 38688-2402 INCORPORATOR

5005 Chatlam Lane Tampa, PL 29/12/1 The name and address of the incorporator to these Articles of Incorporation are:

Robin mailer P.O. BX 272402 Tampa, FL 33688-2402

(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

Signature/Registered Agent