

TRANSMITTAL LETTER

P99000070285

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

800002947388--3  
-08/02/99--01089--019  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: Parents Nite Out, 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 of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: Randy Marker  
Name (Printed or typed)

8158 Robalo Dr.  
Address

Orlando, FL 32825  
City, State & Zip

407 207 3059  
Daytime Telephone number

FILED  
99 AUG -2 PM 1:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

8/9/99  
mm

## 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:

Parents Nite Out inc.

### ARTICLE II PRINCIPAL OFFICE

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

8158 Robalo Drive  
Orlando, FL 32825

### ARTICLE III SHARES

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

1,000

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

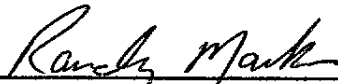
The name and Florida street address of the initial registered agent are:

Randy Marker  
8158 Robalo Drive  
Orlando, FL 32825

### ARTICLE V INCORPORATOR

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

Randy Marker  
8158 Robalo Drive Orlando, FL 32825



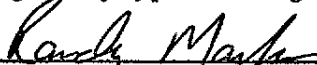
Signature/Incorporator



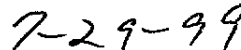
Date

(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*



Signature/Registered Agent



Date

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99 AUG -2 PM 1:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA