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

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SUBJECT:	Graceful De	signs, In	IC.			
	(Proposed corpor		LAHASSEE, F	99 SEP 13 AM 7:	FLED	
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 P Filing Fee, Certified Copy & Certificate of Status			
FROM	Grace Mar Name (P.	rinted or typed)		-		ت بدين
	Winter Park City,			 -	-	, osewa
	(407) (82 Daytime T	2 9191 elephone number				

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

ARTICLES OF INCORPORATION

FILED

The undersigned incorporator, for the purpose of forming a corporation under the Florid 9 SEP 13 AM 7:58 Business Corporation Act, hereby adopts the following Articles of Incorporation. SECRETARY OF STATE TALLAHASSEE. FLORIDA
ARTICLE I NAME
The name of the corporation shall be:
Graceful Designs, INC.
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:
1155 Louisian AVENUC Suite 212
Winterpart, FL 32787
ARTICLE III SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
2,500
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:
Grace Marini 1155 LOUISIAND ANC. St. 212 WINTER PAIN, FL 32989 ARTICLE V INCORPORATOR
ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are:
Grace Marini 1155 Louisian AVC. Ste 212 Winter park, FL 32789
hoeomi 9/1199
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