

TRANSMITTAL LETTER

P 99 000 106 246

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

000003062000-9
-12/06/99-01118-002
*****78.75 *****78.75

SUBJECT:

STUFF FOR KIDS 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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 DEC -6 PM 12:43

FILED

FROM:

SUE WHETZEL
Name (Printed or typed)

7271 CLOISTER DR
Address

SARASOTA FL 34231
City, State & Zip

941-316-1330
Daytime Telephone number

F. 0-150000 DEC 8 1999

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: **Stuff for Kids, Inc.**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
7271 Cloister Dr.
Sarasota, FL 34231

ARTICLE III SHARES

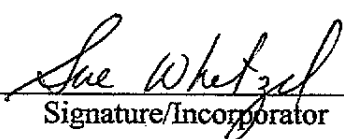
The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 200.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:
Sue Whetzel
7271 Cloister Dr.
Sarasota, FL 34231

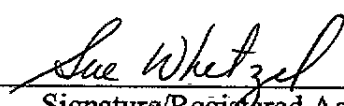
ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:
Sue Whetzel
7271 Cloister Dr.
Sarasota, FL 34231


Signature/Incorporator

12-1-99
Date

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 provision 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

12-1-99
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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