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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

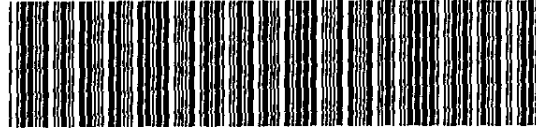
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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MAY 19 PM 2:13
STATE
TALLAHASSEE, FLORIDA

(Handwritten signature) 7-20-04

TRANSMITTAL LETTER

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

SUBJECT: FABULOUS FAUX, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: FABULOUS FAUX, INC.

Name (Printed or typed)

478 N. TURKEY PINE LOOP

Address

LECANTO, FL 34461

City, State & Zip

352/746-5512

Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

FABULOUS FAUX, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

478 N. TURKEY PINE LOOP, LECANTO, FL 34461

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFULL BUSINESS IN FLORIDA

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

CYNTHIA L LARSEN - PRESIDENT/V-PRESIDENT/SECRETARY/TREASURER
478 N. TURKEY PINE LOOP
LECANTO, FL 34461

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

CYNTHIA L. LARSEN, 478 N. TURKEY PINE LOOP, LECANTO, FL 34461

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CYNTHIA L. LARSEN, 478 N. TURKEY PINE LOOP, LECANTO, FL 34461

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Cynthia L. Larsen
Signature/Registered Agent

7/16/04
Date

Cynthia L. Larsen
Signature/Incorporator

7/16/04
Date