

No5000000830

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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WAIT

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MAIL

(Business Entity Name)

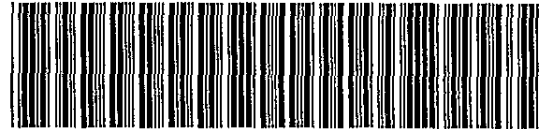
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 JAN 21 PM 2:16

DB 1/26

TRANSMITTAL LETTER

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

SUBJECT: Jackson County Pageants, 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

ADDITIONAL COPY REQUIRED

FROM: Stacy Larkin
Name (Printed or typed)

3243 Fifth Street
Address

Marianna, FL 32446
City, State & Zip

850-482-5275
Daytime Telephone number

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

ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

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ARTICLE I NAME

The name of the corporation shall be:

Jackson County Pageants, Inc.

ARTICLE II PRINCIPAL OFFICE

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

3243 Fifth Street

Marianna, FL 32446

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To produce the Little Miss Junior Miss and Miss Jackson County Pageants as well as the Baby Miss, Tiny Miss, Young Miss and Teen Miss Jackson County Pageants.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

By volunteering

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Stacy Larkin - 3243 Fifth St.

Rhianna Dawling - 5089 Creek Path

Rhonda Smith - 4670 Ridgcrest Dr.

Nebbie Dryden - 3141 Dryden Dr.

Marianna, FL 32446

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Stacy Larkin
3243 Fifth St.

Marianna, FL 32446

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Stacy Larkin
3243 Fifth St.

Marianna, FL 32446

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.

Stacy Larkin
Signature/Registered Agent

1/18/05
Date

Stacy Larkin
Signature/Incorporator

1/18/05
Date