

N16000004169

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16 APR 26 PM 1:08
TALLAHASSEE, FLORIDA
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APR 26 2016

T SCHROEDER

I, Kyle Hartmann, have no
intentions of using the name
for The City Events in the
future.

A handwritten signature in black ink, appearing to read 'Kyle Hartmann', with a stylized, cursive script.

Kyle Hartmann

850-491-7333

COVER LETTER

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

SUBJECT: FOR THE CITY EVENTS, 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 HARTMANN
Name (Printed or typed)

3375 Capital CR NE, Bldg F, Suite 200
Address

Tallahassee, FL 32308
City, State & Zip

850. 491. 7333
Daytime Telephone number

stacy.hartmann@goTRsinc.com
E-mail address (to be used for future annual report notification)

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

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: FOR THE CITY EVENTS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

3375 Capital CR NE
Bldg F, Suite 200
Tallahassee, FL 32308

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: We put on events for non-profits
that do not have a fundraiser for their charity.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

As stated in the bylaws.

ARTICLE V INITIAL OFFICERS AND DIRECTORS

Name and Title: Stacy Hartmann - director Name and Title:

Address: 3375 Capital CR NE Address:

Bldg F,
Suite
200
Tallahassee, FL 32308

Name and Title: Kyle Hartmann - Director Name and Title:

Address: 3375 Capital CR NE Address:

Bldg F,
Suite 200
Tallahassee, FL 32308

Name and Title: Name and Title:

Address: Address:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 APR 26 PM 1:28

APPROVED
AND
FILED

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name:

Stacy Hartmann

Address:

3375 Capital CR NE Bldg F, Suite 200
Tallahassee, FL 32308

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Stacy Hartmann

Address:

3375 Capital CR NE Bldg F, Suite 200
Tallahassee, FL 32308

SECRETARY OF STATE
TALLAHASSEE FLORIDA

16 APR 26 PM 1:29

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AND
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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 4/26/16 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 C. Hartmann

Required Signature of Registered Agent

4/26/16

Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Stacy C. Hartmann

Required Signature of Incorporator

4/26/16

Date