

TRANSMITTAL LETTER

P00000052081

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

SUBJECT: CLEARWATER TENTS AND EVENTS INC.
(Proposed corporate name - must include suffix)

000003261780--5
-05/22/00--01107--008
*****78.75 *****78.75

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

FROM: ROSARIO M. SPIGUTZ
Name (Printed or typed)

1975 WESTBAY DRIVE #109
Address

LARGO, FLORIDA 33770
City, State & Zip

(727) 559-9595
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 MAY 22 AM 9:21

FILED

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

JS/30

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

CLEARWATER TENTS AND EVENTS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2401 WESTBAY DRIVE #429
LARGO, FLORIDA 33770

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE SPECIAL EVENT SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

TWO

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es):

DAVID A. PORTILIA 245 SOUTH GARDEN CIR., BELLEAIR, FLORIDA 33756
ROSARIO M. SPIGUTZ 1975 WESTBAY DR. #109, LARGO, FLORIDA 33770

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent are:

ROSARIO M. SPIGUTZ 1975 WESTBAY DR. #109, LARGO, FLORIDA 33770

ARTICLE VII INCORPORATOR


The name and address of the Incorporator are:

DAVID A. PORTILIA 245 SOUTH GARDEN CIR., BELLEAIR, FLORIDA 33756

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

5/12/00
Date


Signature/Incorporator

5/12/00
Date

FILED
00 MAY 22 AM 9:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA