

P01000073/24

TRANSMITTAL LETTER

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

FILED
01 JUL 23 PM 12:20
SECRETARY OF STATE
TALLAHASSEE, FL 32304

SUBJECT: Signature Occasions, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

200004491442--0

-07/23/01--01075--008

*****78.75 *****78.75

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: Amy J. Kowalski

Name (Printed or typed)

5720 Eaglemount Circle

Address

Lithia, FL 33547

City, State & Zip

813-643-0272

Daytime Telephone number

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

7-25-01
WCC

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:

Signature Occasions, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1907 Durant Road
Valrico, FL 33594

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide event planning services to corporate and private clients

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Pres./Trea: Ellen Chambliss, 1907 Durant Rd., Valrico, FL 33594
V.P./Sec: Amy Kowalski, 5720 Eaglemount Circle, Lithia, FL 33547

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Ellen Chambliss, 1907 Durant Road, Valrico, FL 33594

ARTICLE VII INCORPORATOR

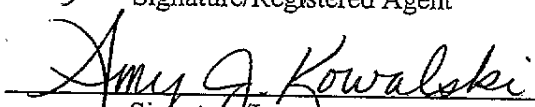
The name and address of the Incorporator is:

Amy Kowalski, 5720 Eaglemount Circle, Lithia, FL 33547

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


Signature/Registered Agent

7-19-01
Date


Signature/Incorporator

7-19-01
Date

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TALLAHASSEE, FL 32301