

P02000011106

TRANSMITTAL LETTER

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

APPROVED
AND
FILED
02 JAN 31 AM 11:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: ALUMNI TEES & TAGS, INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

300004850733--6
-01/31/02--01053--001
*****87.50 *****87.50

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

RECEIVED
02 JAN 31 AM 10:57
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FROM: ELONDA SIMMONS
Name (Printed or typed)

861 Campello ST
Address

ALTAMONTE SPRINGS FL 32701
City, State & Zip

941-839-7628
Daytime Telephone number

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

[Handwritten signature]
1/31
W

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:

Alumni Tees & Tags, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

861 Campello St., Altamonte Springs, Fl. 32701

Mailing address is P.O. Box 300331, Fern Park, Fl 32730.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

any lawful business permitted under the laws of the state of Florida and the United States of America.

ARTICLE IV SHARES

The number of shares of stock is:

One Hundred (100)

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

(P) Elonda Simmons, 861 Campello St., Altamonte Springs, Fl. 32701

ARTICLE VI REGISTERED AGENT

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

Elonda Simmons, 861 Campello St., Altamonte Springs, Fl. 32701

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Elonda Simmons, 861 Campello St., Altamonte Springs, Fl. 32701

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

Elonda Simmons

Signature/Registered Agent

1-31-02

Date

Elonda Simmons

Signature/Incorporator

1-31-02

Date

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AND
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