

P03000046886

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

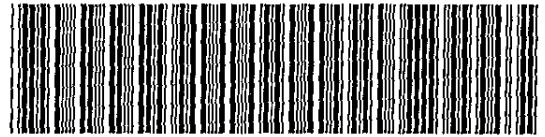
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE
TALLAHASSEE, FLORIDA

CB 428

TRANSMITTAL LETTER

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

SUBJECT: Key West Event Management, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: BRANT VOSS
Name (Printed or typed)

1407 SUN TERRACE
Address

Key West, FL 33040
City, State & Zip

305 296 5808
Daytime Telephone number

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

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: **Key West Event Management, Inc.**

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: **1407 Sun Terrace
Key West, FL 33040**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
**Event management for private &
public clients & corporations**

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):
**Brant T. Voss, President
1407 Sun Terrace
Key West, FL 33040**

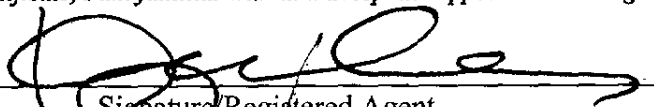
ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:
**Karen Cabanas, Esq.
317 Whitehead St.
Key West FL 33040**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
**Brant Voss
1407 Sun Terrace, Key West FL 33040**


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

4/21/03

Date



Signature/Incorporator

4/21/03

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA