

PD3000101515

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

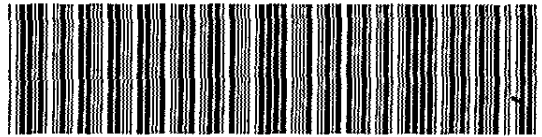
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Cary John Photography, 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

☒ \$115.00
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Cary John Kwiatkowski
Name (Printed or typed)

7217 8th Ave. North
Address

St. Petersburg FL 33710
City, State & Zip

727. 343.7351
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:

Cary John Photography, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7217 8th Avenue North
St Petersburg, FL 33710

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Portrait, Wedding, Commercial
Photography

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Cary John Kwiatkowski, President
Dianne Patricia Kwiatkowski, Vice President

ARTICLE VI REGISTERED AGENT

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

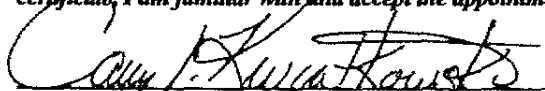
Cary John Kwiatkowski
7217 8th Ave. N. St. Petersburg, FL 33710

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

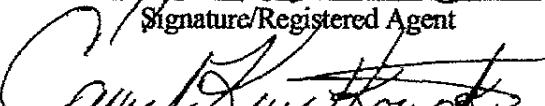
Cary John Kwiatkowski
7217 8th Ave N. St. Petersburg FL 33710

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

9.8.03

Date


Signature/Incorporator

9.8.03

Date

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SECRETARY OF STATE
TALLAHASSEE FLORIDA