

P03000140519

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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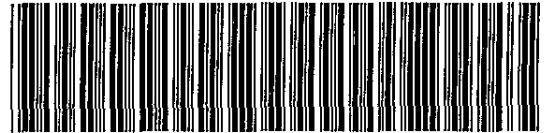
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03 NOV 18 PM 12:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT: MegaConvention ,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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Elizabeth Widera

Name (Printed or typed)

5020 Parrish Lane

Address

Safety Harbor , Florida 34695

City, State & Zip

813-891-1702

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:

MegaConvention, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5020 Parrish Lane
Safety Harbor, Florida 34695

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Convention Planning

ARTICLE IV SHARES

The number of shares of stock is:

1,000 shares authorized

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Elizabeth Widera
5020 Parrish Lane
Safety Harbor, Florida 34695

President

ARTICLE VI REGISTERED AGENT

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

Elizabeth Widera
5020 Parrish Lane
Safety Harbor, Florida 34695

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Elizabeth Widera
5020 Parrish Lane
Safety Harbor, Florida 34695

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

Elizabeth Widera
Signature/Registered Agent

11-17-03
Date

Elizabeth Widera
Signature/Incorporator

11-17-03
Date

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TALLAHASSEE FLORIDA