

PO4000072470

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

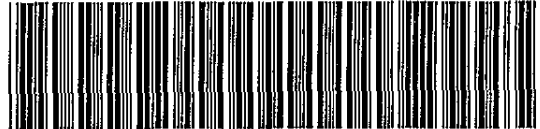
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA


TH 5/4/04

# TRANSMITTAL LETTER

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

SUBJECT: EVENT THIS, 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: Suzanne Mensing  
Name (Printed or typed)

7849 Brodie Drive  
Address

New Port Richey, FL 34653  
City, State & Zip

727-243-0026  
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:

*Event This, Inc.*

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*1121 Orange Avenue Dunedin, FL 34698*

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

*Event and party planning services*

### ARTICLE IV SHARES

The number of shares of stock is:

*One hundred (100)*

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

*Jeanne Monnis  
1121 Orange Ave  
Dunedin, FL 34698  
President*

*Suzanne Mensing  
7849 Brodie Dr  
New Port Richey, FL 34653  
Secretary/Treasurer*

### ARTICLE VI REGISTERED AGENT

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

*Suzanne Mensing  
7849 Brodie Dr  
New Port Richey, FL 34653*

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Suzanne Mensing  
7849 Brodie Dr  
New Port Richey, FL 34653*

\*\*\*\*\*

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

*Suzanne Mensing*  
\_\_\_\_\_  
(Signature/Registered Agent)

*May 1, 2004*  
\_\_\_\_\_  
Date

*Suzanne Mensing*  
\_\_\_\_\_  
(Signature/Incorporator)

*May 1, 2004*  
\_\_\_\_\_  
Date

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CLERK OF STATE  
TALLAHASSEE, FLORIDA