

PD4000155616

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

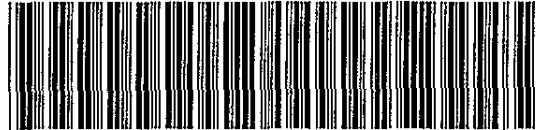
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C.S. 11/16

TRANSMITTAL LETTER

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

SUBJECT: VALERIE'S ILLUSIONS, 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: VALERIE PRICE

Name (Printed or typed)

2637 COUNTRY PLACE BLVD

Address

TRINITY, FL 34655

City, State & Zip

727-375-1568

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:

VALERIE'S ILLUSIONS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2637 COUNTRY PLACE BLVD.
TRINITY, FL 34655

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

RETAIL AND GIFT SHOP TO SELL ITEMS TO THE PUBLIC.

ARTICLE IV SHARES

The number of shares of stock is:

100 @ no par value.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

VALERIE PRICE
2637 COUNTRY PLACE BLVD.
TRINITY, FL 34655

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

VALERIE PRICE
2637 COUNTRY PLACE BLVD.
TRINITY, FL 34655

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

VALERIE PRICE
2637 COUNTRY PLACE BLVD.
TRINITY, FL 34655

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

Valerie Price
Signature/Registered Agent

11-05-04
Date

Valerie Price
Signature/Incorporator

11-05-04
Date

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04 NOV 10 AM 9:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA