

PO4000160381

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT: STEMLE MEETINGS AND EVENTS, 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: DONANDREA R. STEMLE
Name (Printed or typed)

6950 ESSEX DRIVE
Address

FORT MYERS FLORIDA 33919
City, State & Zip

239 454-1701
Daytime Telephone number

DEPT OF STATE
TALLAHASSEE, FLORIDA

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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:

STEMLE MEETINGS AND EVENTS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8695 COLLEGE PARKWAY, SUITE 231
FORT MYERS, FLORIDA 33919

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MEETINGS AND EVENTS PLANNING

ARTICLE IV SHARES

The number of shares of stock is: 1000 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DONANDREA R. STEMLE; PRESIDENT
DUANE L. STEMLE, JR; SECRETARY/TREASURER

ARTICLE VI REGISTERED AGENT

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

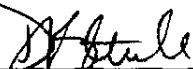
DONANDREA R. STEMLE
8695 COLLEGE PARKWAY SUITE
FORT MYERS, FLORIDA 33919

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DONANDREA R. STEMLE
6950 ESSEX DRIVE
FORT MYERS, FL 33919

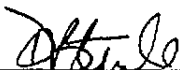
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity:



Signature/Registered Agent

10/25/04

Date



Signature/Incorporator

10/25/04

Date

CLERK OF STATE
TALLAHASSEE, FLORIDA

04 NOV 19 PM 2:40

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