

P04000169984

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

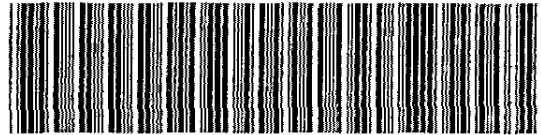
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/03/04--01008--004 **78.75

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04 NOV -3 AM 9:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C.S. 12/21

TRANSMITTAL LETTER

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

SUBJECT: Party Professional 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: Brenda Tuncer

Name (Printed or typed)

395 Pristine Water Lane

Address

Mary Esther Floirda 32569

City, State & Zip

850-243-4466

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

November 8, 2004

BRENDA TUNCER
395 PRISTINE WATER LANE
MARY ESTHER, FL 32569

SUBJECT: PARTY PROFESSIONALS INC.
Ref. Number: W04000041023

We have received your document for PARTY PROFESSIONALS INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

You did not give an address for the initial officers.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Carolyn Lewis
Regulatory Specialist II
New Filings Section

Letter Number: 404A00063877

RECEIVED
04 DEC 20 PM 4: 52
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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:

Party Professionals Inc.

Emerald Coast Party Professionals Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

255 Miracle Strip Pkwy SE B18
Fort Walton Beach, FL 32548

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Full service caterers and party planners

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Anita Burton - President

Brenda Tuncer - Vice President

*395 Pristine Water Lane
Mary Esther, FL 32569*

*359 Billfish #7
Fort Walton Bch, FL
32548*

ARTICLE VI REGISTERED AGENT

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

Brenda Tuncer
395 Pristine Water Lane
Mary Esther, Florida 32569

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Brenda Tuncer
395 Pristine Water Lane
Mary Esther, Florida 32569

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

Brenda Tuncer

Signature/Registered Agent

10-27-04

Date

Brenda Tuncer

Signature/Incorporator

10-27-04

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA