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## TRANSMITTAL LETTER

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

SUBJECT:	MFMORY VION (PROPOSED CORPORATE	INGS INC.	ė čitovių.
	(FROFOSED CORPORATE	NAME - MUST INCLUD	e Surfix]
Enclosed is an origin	nal and one(1) copy of the articl	es of incorporation and a	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PPY REQUIRED
	REGWALD TRAI		 
	TAllahassee Tallahassee Tity,		
	(8/3) 362 - 882 Daytime To	elephone 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: MEMORY WEDDINGS INC. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 418 W 4th Ave Apt A-1 TAllAHASSEE, FL ARTICLE III **PURPOSE** The purpose for which the corporation is organized is: Wessing Planisher / SErvices. ARTICLE IV SHARES The number of shares of stock is:

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)
The name(s), address(es) and title(s):
REGINALO Franklin - CO-FOUNDER COUNTY) President
GWINDOLYN DOW - CO-FOUNDER LOWNER) VILE- PRESIDENT
418 U 4th AVE Apt A-1
TALLAHATSEE FL 32303
ARTICLE VI REGISTERED AGENT
The name and Florida street address of the registered agent is:
REGINALD FRANKLIN
418 W 4th Ave Apt Al
TAllahassee, FZ 32363
ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:

72303

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