

P05000097479

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP



WAIT

MAIL

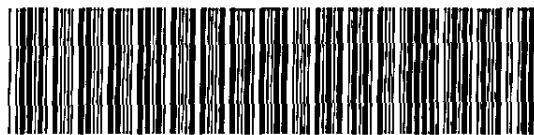
(Business Entity Name)

(Document Number)

Certified Copies 1 Certificates of Status \_\_\_\_\_

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07 JUN 12 PM 2:27 05 JUL 12 PM 2:47  
FILED  
FLORIDA SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
2007-05-12 09:47:27  
C-12

## TRANSMITTAL LETTER

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

**SUBJECT:** Your Wedding Creations, 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  
Filing Fee  
& Certified Copy  
 \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Clelie Leblanc  
Name (Printed or typed)

819 Quintilian Ave.

Address

Orlando, FL 32809

City, State & Zip

(407) 854-8192

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:

Your Wedding Creations, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

819 Quintilian Ave  
Orlando, FL 32809

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

for wedding planning & design.

### ARTICLE IV SHARES

The number of shares of stock is:

1

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Clelie Leblanc (P)  
Paige Beauvais (VP)

### ARTICLE VI REGISTERED AGENT

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

Paige Beauvais  
819 Quintilian Ave.  
Orlando, FL 32809

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Paige Beauvais  
819 Quintilian Ave.  
Orlando, FL 32809

\*\*\*\*\*  
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

D. Meister

Signature/Registered Agent

D. Meister

Signature/Incorporator

05 JUL 12 PM 2:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

 7-12-05

Date

7-12-05

Date