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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

2148

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
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: Clelie Leblanc
Name (Printed or typed)

819 Quintilian Ave.
Address

Orlando, FL 32809
City, State & Zip

(407) 854-3192
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/mailling 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



Signature/Registered Agent



Signature/Incorporator

 7-12-05

Date

7-12-05

Date

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