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| (Requestor's Name)                      |                |           |  |
|---|----------------|-----------|--|
| (Address)                               |                |           |  |
| (Ad                                     | dress)         |           |  |
| (City/State/Zip/Phone #)                |                |           |  |
| PICK-UP                                 | ☐ WAIT         | MAIL      |  |
| (Business Entity Name)                  |                |           |  |
| (Document Number)                       |                |           |  |
| Certified Copies                        | _ Certificates | of Status |  |
| Special Instructions to Filing Officer: |                |           |  |
|   |                |           |  |
|   |                | -         |  |
|   |                |           |  |

Office Use Only

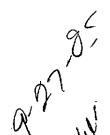


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SECRETARY OF STATE
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FILED



# **COVER LETTER**

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

| SUBJECT: Party Connection, Inc. (PROPOSED CORPORA)      | TE NAME – <u>MUST INCL</u>                         | UDE SUPPLY)   |
|---|--|---|
| Enclosed are an original and one (1) copy of the artic  | cles of incorporation and                          | lacheck for:  |
| \$78.75  Filing Fee Filing Fee  & Certificate of Status | \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status  PY REQUIRED |
| FROM: Cynthia Jean Carnley                              | (Printed or typed)                                 |   |
| 4415 Constitution Lane                                  | e<br>Address                                       |   |
| Marianna, FL 32448 City,                                | State & Zip  |   |
| (850) 526-3447  | 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:

Party Connection, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4415 Constitution Lane Marianna, FL 32448

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To resale party supplies

#### 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):

Cynthia Jean Carnley, Pres 1975 Hope School Drive Marianna, FL 32448

Larry Udon Carnley, Vice Pres. 1975 Hope School Drive Marianna, FL 32448

# ARTICLE VI REGISTERED AGENT

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

Cynthia Jean Carnley 1975 Hope School Drive Marianna, FL 32448

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Cynthia Jean Carnley 1975 Hope School Drive Marianna, FL 32448

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

Signature/Incorporator

FILED

MOS SEP 27 P 3 51

TALLAHASSEE, FLORIDA