

PD5000133726

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

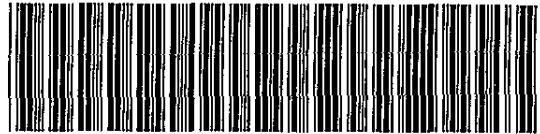
(Business Entity Name)

(Document Number)

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

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FILED  
05 SEP 29 PM 1:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

9/30/05  
BWK

**COVER LETTER**

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

**SUBJECT:** Cherished Events of Miami, 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:** Lynn M. Gonzalez

Name (Printed or typed)

17150 N. Bay Rd. #2214

Address

Sunny Isles Beach, FL 33160

City, State & Zip

305-785-2269

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:

Cerished Events of Miami, Inc.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

17150 N. Bay Rd. #2214  
Sunny Isles Beach, FL 33160

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business performed for personal event planning and event coordination for special functions.

## 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):

Lynn M. Gonzalez  
17150 N. Bay Rd. #2214  
Sunny Isles Beach, FL 33160  
Owner and CEO

## ARTICLE VI REGISTERED AGENT

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

Lynn M. Gonzalez  
17150 N. Bay Rd. #2214  
Sunny Isles Beach, FL 33160

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lynn M. Gonzalez  
17150 N. Bay Rd. #2214  
Sunny Isles Beach FL 33160

\*\*\*\*\*

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

LYNN M. Gonzalez

Date

9/26/05

Signature/Incorporator

LYNN M. Gonzalez

Date

9/26/05