

P05000145980

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(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

Office Use Only

505-691-185-2515
W05-50392
691



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11/08/05--01015--006 **70.00

2005 NOV 22 AM 9:59
TALLAHASSEE
FLORIDA

12/23/05

COVER LETTER

2005 DEC 22 AM 9:59

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

STATE
TALLAHASSEE FLORIDA

SUBJECT: REUNION CLASSICS 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: MARK A. MANGICARD
Name (Printed or typed)

7465 CARRIAGE SIDE CT.
Address

JACKSONVILLE FL 32256
City, State & Zip

904-993-9501
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

CONSTANCE C. SUGGS
1769 Lakeshore Drive, North
Orange Park, FL 32003

2005 DEC 22 AM 9:59
TALLAHASSEE STATE
FLORIDA

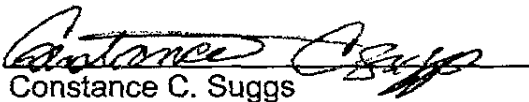
State of Florida
Florida Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, FL 322314

RE: Reunion Classics, Inc.

To Whom it May Concern:

Please accept this letter as a release and dissolution concerning the above incorporation, currently held in my name. I have no intention of reinstating Reunion Classics, and as a result, I release this name for use to another entity, specifically Mark A. Mangicaro.

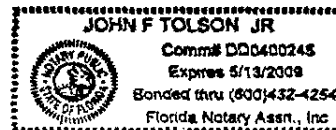
Please feel free to contact me with any questions or concerns.


Constance C. Suggs

Dec. 6, 2005
Dated:

SWORN TO AND SUBSCRIBED before me this 6 day of Dec 9th November, 2005, by Constance C. Suggs, who is personally known or who produced _____ as identification.


NOTARY PUBLIC
MY COMMISSION EXPIRES: 5/13/09



JOHN F. TOLSON, JR.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2005 DEC 22 AM 9:59
TALLAHASSEE FLORIDA

December 13, 2005

MARK A. MANGICARO
7465 CARRIAGE SIDE CT
JACKSONVILLE, FL 32256

SUBJECT: REUNION CLASSICS
Ref. Number: W05000050392

We have received your document for REUNION CLASSICS and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

An effective date may be added to the Articles of Incorporation if a 2006 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden
Document Specialist
New Filing Section

Letter Number: 405A00071593



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

2005 DEC 22 AM 9:59

STATE
TALLAHASSEE FLORIDA

November 9, 2005

MARK A. MANGICARO
7465 CARRIAGE SIDE CT
JACKSONVILLE, FL 32256

SUBJECT: REUNION CLASSICS
Ref. Number: W05000050392

We have received your document for REUNION CLASSICS and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock.

An effective date may be added to the Articles of Incorporation if a 2006 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden

Document Specialist
NEW FILINGS

Letter Number: 805A00066858

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:

Reunion Classics, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P. O. Box 897
Orange Park, Florida 32067-0897

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Reunion Planner

ARTICLE IV SHARES

The number of shares of stock is:

~~Not a publically traded company~~ 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Mark Mangicaro - Owner - 7465 Carriage Side Court
Jacksonville, Florida 32256

Debra Wilson - Manager - 320 Bonnilyn Drive
Orange Park, Florida 32073

Ron Wilson - I.T. - 320 Bonnilyn Drive
Orange Park, Florida 32073

ARTICLE VI REGISTERED AGENT

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

Mark A. Mangicaro
7465 Carriage Side Court
Jacksonville, Florida 32256

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Mark A. Mangicaro
7465 Carriage Side Court
Jacksonville, Florida 32256

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

11/24/05
Date

Signature/Incorporator

11/21/05
Date