

PO600083977

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

(Business Entity Name)

(Document Number)

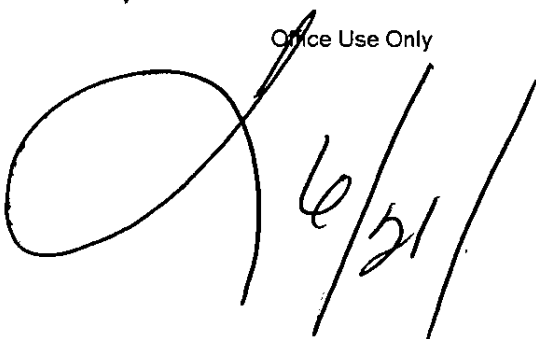
Certified Copies \_\_\_\_\_

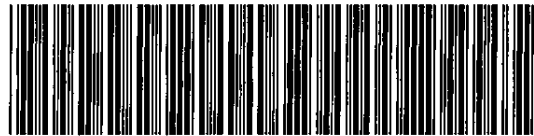
Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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Office Use Only

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FILED  
06 JUN 20 PM 2:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

SUBJECT: Xclusive Weddings, 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: CLAUDIA LYN  
Name (Printed or typed)

7950 W. MCNAB Rd #216  
Address

TAMARAC, FL. 33321  
City, State & Zip

954.718.3940  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 5, 2006

CLAUDIA LYN  
7950 W. MCNAB RD.  
#216  
TAMARAC, FL 33321

SUBJECT: XCLUSIVE WEDDINGS, INC.  
Ref. Number: W06000025645

We have received your document for XCLUSIVE WEDDINGS, INC.. However, the document has not been filed and is being returned for the following:

You must list at least one incorporator with a complete business street address.

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) 245-6934.

Loria Poole  
Document Specialist  
New Filing Section

Letter Number: 506A00038726

RECEIVED  
06 JUN 21 AM 11:26  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

# 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:

Xclusive Weddings, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7950 W. McNab Rd. #216  
TAMARAC, FL. 33321

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Weddings and other special events

## ARTICLE IV SHARES

The number of shares of stock is:

100 Shares

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

CLAUDIA LYN - 7950 W. McNab Rd. #216 TAMARAC, FL. 33321 - President  
George Ball - 7950 W. McNab Rd. #216 TAMARAC, FL. 33321 - Vice-President  
Noema Lyn - 4792 N.W. 3rd St. Plantation, FL. 33317 - Secretary

## ARTICLE VI REGISTERED AGENT

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

CLAUDIA LYN  
7950 W. McNab Rd. #216  
TAMARAC, FL. 33321

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CLAUDIA LYN  
7950 W. McNab Rd. #216  
TAMARAC, FL. 33321

\*\*\*\*\*

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

Chy  
Signature/Registered Agent/Incorporator

5/24/06  
Date

Date

FILED  
06 JUN 20 PM 2:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA