P07000000034

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL
(Address) (City/State/Zip/Phone #)
(Address) (City/State/Zip/Phone #)
(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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-W07-6933



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02/09/07--01005--006 **87.50

2007 FEB 19 PH 1: 34 SECRETARY OF STATE

COVER LETTER

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

SUBJECT:	Moments 12	Made Perfé	ect Inc.
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	a check for:
\$70.00	\$78.75	\$78.75	\$87.50
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy
	& Certificate of Status	& Certified Copy	& Certificate of
. 1			Status
••		ADDITIONAL CO	PY REQUIRED
FROM:	Elizabeth	4 S. Ga	rvey
	2843 C	amomile Address	Drive
	Orlando,	Florida y, State & Zip	<i>328</i> 37

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



February 9, 2007

ELIZABETH S. GARVEY 2843 CAMOMILE DRIVE ORLANDO, FL 32837

SUBJECT: MOMENTS MADE PERFECT, INC.

Ref. Number: W07000006933

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

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

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: 507A00010004

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: Moments Made Perfect Inc.
The name of the corporation shall be: Moments Made Perfect sinc.
Part of
ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is: 2843 Camomile Drive
Orlando, FLorida 32837
ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Wedding, Catering and event Planning, Consultation and coordination but not limited to
Planning, consultation and coordination but not
limited to
ARTICLE IV SHARES
The number of shares of stock is: / 00
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
List name(s), address(es) and specific title(s): The Associated A
List name(s), address(es) and specific title(s): Elizabeth S. Garvey Director / 2843 Camomile Drive Orland FL 32837
Karlus Vausa da Dariber 151/12 Harrow Gatesway
Karlyn Young Co Director 15163 Harrow Gatesway Winter Garden, FL 34787
ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Elizabeth S. Garny 2843 Camonile Deve
2843 Camonile Deve
Orlando, FL 32837
The <u>name and address</u> of the Incorporator is: Elizabeth S. Garvey
The mame and address of the incorporator is.
2843 Camomile Drive Orlando, FL 32837
Wriando, FL 34831

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
Cairon el aluntas
Signature Registered Agent Date
in deligation and all all all all all all all all all al
Signature/Incorporator Date