

PO700053567

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

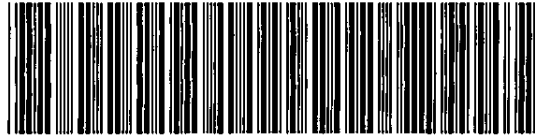
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07 MAY -4 PM 4:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pa

COVER LETTER

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

SUBJECT: PHOTOGRA-BEE, 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: KAREN SPELL
Name (Printed or typed)

829 WOODBURY RD #101
Address

ORLANDO, FL 32828
City, State & Zip

407-306-0454
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 17, 2007

KIMBERLY K SPELL - FOWLER
14369 SOUTHERN RED MAPLE DR
ORLANDO, FL 32828

SUBJECT: IMPRESSIONS IN TIME PHOTOGRAPHY, INC.
Ref. Number: W07000013889

We have received your document for IMPRESSIONS IN TIME PHOTOGRAPHY, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

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

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return 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 850-245-6052.

Paisley A Alford
New Filing Section
Division of Corporations

Letter Number: 907A00019576

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:

PHOTOGRA-BEE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

14369 SOUTHERN RED MAPLE DR.
ORLANDO, FL 32828

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PHOTOGRAPHY SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

ONE HUNDRED

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

KIMBERLY K SPELL-FOWLER

ARTICLE VI REGISTERED AGENT

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

KAREN R. SPELL
829 WOODBURY RD #101 ORLANDO, FL 32828

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

KIMBERLY K SPELL-FOWLER
14369 SOUTHERN RED MAPLE DR.
ORLANDO, FL 32828

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

Kim Spell
Signature/Registered Agent

Kim Spell
Signature/Incorporator

FILED
07 MAY -4 PM 4:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4/12/07

Date

4/30/07

Date