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07 NOV -9 PM 4: 15

SECRETARY OF STATE

1/13/07

COVER LETTER



07 NOV -9 PM 4:15

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

SUBJECT: Cru	ising Weddings, Inc.			
	(PROPOSED CORPORA	ÎE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	☑ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	Brook A. Wilke	(Printed or typed)		
	Address			
Holiday, Florida 34691 City, State & Zip				
	727-364-9685	elephone 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)

SECRETARY OF STATE DIVISION OF CORPORATIONS

07 NOV -9 PH 4: 15

ARTICLE I NAME

The name of the corporation shall be:

Cruising Weddings, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 3220 Topp Drive Holiday, Florida 34691

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The corporation shall engage in any activity or business permitted under the laws of the state of Florida and the United States.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V __INITIAL OFFICERS AND/OR DIRECTORS

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

Brook A. Wilke 3220 Topp Drive Holiday, Florida 34691 President- Secretary-Treasurer

REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: Brook A. Wilke 3220 Topp Drive Holiday, Florida 34691

INCORPORATOR ARTICLE VII

The <u>name and address</u> of the Incorporator is: Brook A. Wilke 3220 Topp Drive Holiday, Florida 34691

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