

PO8000039124

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

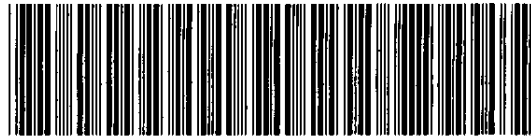
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

505
W08-13476



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03/13/08--01018--018 **87.50

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DIVISION OF CORPORATIONS
08 APR 17 PM 2:24

gf 4/17/08

COVER LETTER

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DIVISION OF CORPORATIONS

08 APR 17 PM 2:24

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

SUBJECT: EVENT ALL, LLC
(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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Andreas Sanchez
Name (Printed or typed)

8900 NW 107 CT UNIT # 215
Address

DORAL, FL 33178
City, State & Zip

305-988-8905
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

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DIVISION OF CORPORATIONS

08 APR 17 PM 2:25

March 28, 2008

ANDREA SANCHEZ
8900 NW 107 CT
UNIT #215
DORAL, FL 33178

SUBJECT: EVENTALL, INC.
Ref. Number: W08000013476

We have received your document for EVENTALL, 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):

Please accept our apology for failing to mention this in our previous letter.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected 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
Regulatory Specialist II
New Filing Section

Letter Number: 008A00018327

NOTE:

Please see number of shares under
Article IV

Thank you,

Andrea Sanchez

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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08 APR 17 AM 8:00
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

08 MAR 21 AM 8:00

DIVISION OF CORPORATIONS

March 13, 2008

ANDREA SANCHEZ
8900 NW 107 CT
UNIT #215
DORAL, FL 33178

SUBJECT: ~~EVENTALL, LLC~~ ← (AS) EVENTALL INC.^(AS)
Ref. Number: W08000013476

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

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.

Please return the corrected 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
Regulatory Specialist II
New Filing Section

Letter Number: 508A00015530

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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DIVISION OF CORPORATIONS

08 APR 17 PM 2:25

ARTICLE I NAME

The name of the corporation shall be:

EVENTALL INC.

(AS) (EVENTALL INC.)

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

8900 NW 107 CT UNIT # 215 DORAL, FL 33178

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

EVENT AND MEETING PLANNING

ARTICLE IV SHARES

The number of shares of stock is:

10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ANDREA SANCHEZ
PRESIDENT

8900 NW 107 CT UNIT # 215
DORAL, FL 33178

ARTICLE VI REGISTERED AGENT

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

ANDREA SANCHEZ
8900 NW 107 CT UNIT #215
DORAL, FL 33178

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

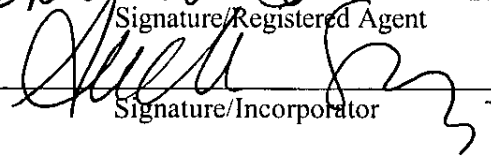
ANDREA SANCHEZ
8900 NW 107 CT UNIT #215
DORAL, FL 33178

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

3/11/08
Date



Signature/Incorporator

3/11/08
Date

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