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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

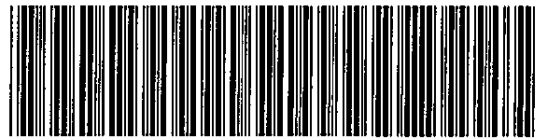
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2008 MAY 16 P 1:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: RAFALARS' WEDDING PLANNING SERVICES, 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: RAFALARS' WEDDING PLANNING SERVICES, INC.
Name (Printed or typed)

2587 Spirea Street
Address

Jacksonville, Florida 32209
City, State & Zip

(904) 629-4136
Daytime Telephone 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)

ARTICLE I NAME

The name of the corporation shall be:

RAFALARS' WEDDING PLANNING SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principle street address and mailing address, if different is:

2587 Spirea Street
Jacksonville, Florida 32209

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose is to assist individuals in planning and organizing their weddings

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Rafalar Hightower, Director
2587 Spirea Street
Jacksonville, Florida 32209

ARTICLE VI REGISTERED AGENT

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

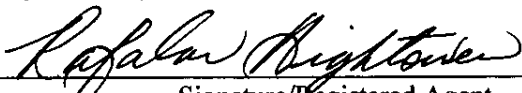
Rafalar Hightower
2587 Spirea Street
Jacksonville, Florida 32209

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Rafalar Hightower
2587 Spirea Street
Jacksonville, Florida 32209

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



Signature/Incorporator

FILED

2008 MAY 16 P 1:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA


Date


Date