

PD8000088190

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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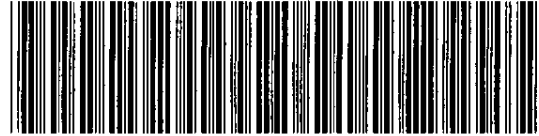
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/29/08--01011--004 **78.75

FILED
08 SEP 26 PM 2:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
9/26

1. PD8-40646

COVER LETTER

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

SUBJECT: PS Catering and Event Management 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: PS Catering and Event Management Inc.

Name (Printed or typed)

322 SE 4th Ave

Address

Delray Beach Florida 33483

City, State & Zip

561-512-7671

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 2, 2008

PS CATERING AND EVENT MANAGEMENT INC.
322 SE 4TH AVE
DELRAY BEACH, FL 33483

SUBJECT: PS CATERING AND EVENT MANAGEMENT INC.
Ref. Number: W08000040646

We have received your document for PS CATERING AND EVENT MANAGEMENT INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as incorporator in the document and the person signing as incorporator must be the same.

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) 245-6879.

Ruby Dunlap
Regulatory Specialist II
New Filing Section

Letter Number: 208A00048300

RECEIVED
08 SEP 26 AM 09 00
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

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

FILED

08 SEP 26 PM 2:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

PS Catering and Event Management Inc.

ARTICLE II PRINCIPAL OFFICE

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

322SE 4th Ave Delray Beach, Florida 33483

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide catering and event management services

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):

Paul Reilly, 322 SE4th Ave Delray Beach Florida 33483, Secretary Treasurer
Scott Yarcusko, 322 SE 4th Ave Delray Beach Florida 33483, President

ARTICLE VI REGISTERED AGENT

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

Paul Reilly, 322 SE4th Ave Delray Beach Florida 33483

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Paul Reilly, 322 SE4th Ave Delray Beach Florida 33483

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

08/04/2008

Date

08.04.08

Date