

P/0000006441

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

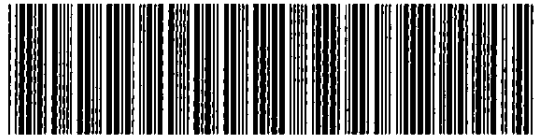
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/11/10--01037--011 **78.75

FILED

10 JAN 21 AM 9:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W/0000001279

ack

1-25-10

RH

COVER LETTER

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

SUBJECT: Flowers & Wedding Boutique 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:

Arlene Allison

Name (Printed or typed)

5359 NDB Hill Road

Address

Sunrise, FL 33351

City, State & Zip

954-141-9150

Daytime Telephone number

Arleneallison@att.net

E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

FILED

10 JAN 21 PM 12:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

January 12, 2010

ARLENE ALLISON
8180 CLEARY BLVD #1803
PLANTATION, FL 33324

SUBJECT: FLOWERS & WEDDING BOUTIQUE
Ref. Number: W10000001279

We have received your document for FLOWERS & WEDDING BOUTIQUE 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 name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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

The registered agent and street address must be consistent wherever it appears in your document.

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) 245-6869.

Christine Haney
Senior Clerk
New Filing Section

Letter Number: 410A00000910

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:

Flowers & Wedding Boutique Inc

ARTICLE II PRINCIPAL OFFICE

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

5359 Nob Hill Road
Sunrise, FL 33351

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Wedding and Event Planning

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):

Arlene Allison - CEO
5359 Nob Hill Rd
Sunrise, FL 33351

ARTICLE VI REGISTERED AGENT

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

~~Stephen Allison~~
~~5180 Clearing Blvd #1803~~
~~Plantation, FL 33324~~

Stephen Allison
5359 Nob Hill Rd
Sunrise, FL 33351

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Arlene Allison
5359 Nob Hill Road
Sunrise, FL 33351

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

Stephen Allison

Signature/Registered Agent

1-16-10

Date

Arlene Allison

Signature/Incorporator

1-16-10

Date

FILED
10 JAN 21 AM 9:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA