

P100000293 13

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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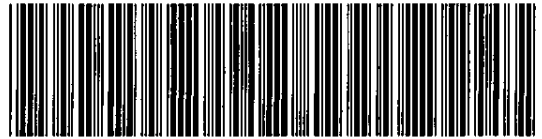
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10 APR -2 PM 3:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4-5-10 9

COVER LETTER

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

SUBJECT: PAGEANT CENTER 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: FRANKLIN DEESE
Name (Printed or typed)

725 LAKE GENEVA DRIVE
Address

St AUGUSTINE FL 32092
City, State & Zip

904-230-8952
Daytime Telephone number

fdeese@att.net
E-mail address: (to be used for future annual report notification)

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:

PAGEANT CENTER INC.

ARTICLE II PRINCIPAL OFFICE

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

PREFERS to use P.O. BOX 840077 St AUGUSTINE FL 32080

475 HIGH TIDE DRIVE
ST AUGUSTINE FL 32080

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INCORPORATE FROM SCHEDULE C as a BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100@ 1.00 dollar par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

^{ABEL}
ANN-MARIE ABLE PRESIDENT & CEO
475 HIGH TIDE DRIVE
ST AUGUSTINE 32080

ARTICLE VI REGISTERED AGENT

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

ANN-MARIE ABLE ABEL
475 HIGH TIDE DRIVE
ST AUGUSTINE FL 32080

ARTICLE VII INCORPORATOR

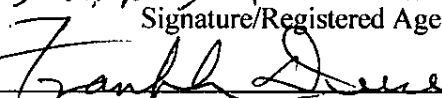
The name and address of the Incorporator is:

DEESE TAX ACCOUNTING & insurance inc.
725 LAKE GENEVA DRIVE
ST AUGUSTINE FL 32092

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

3-31-2010

Date

3/30/2010

Date

FILED
10 APR - 2 PM 3:17
CLERK OF CIRCUIT COURT
TALLAHASSEE, FL 32304