

PIZ00000459

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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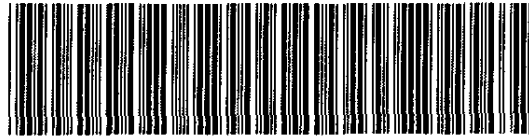
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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07/30/12--01025--008 **78.75

12 JUL 30 PM 4:55
DIVISION OF REVENUE
TREASURY DEPARTMENT

COVER LETTER

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

SUBJECT: Atlantic Coast Events, 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: Julie B. Wiechmann + Brittney J. Rose
Name (Printed or typed)

13733 Pleasant Valley Drive
Address

Jacksonville, FL 32225
City, State & Zip

Julie (904) 608-9012 Brittney (904) 910-9899
Daytime Telephone number

atlanticcoastevents@gmail.com
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:

Atlantic coast Events, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

13733 Pleasant Valley Dr.
Jacksonville, FL 32225

13733 Pleasant Valley Drive
Jacksonville, FL 32225

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

"professional Corporation" in event planning desired.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: President - Julie B. Wiechmann

Address: 13733 Pleasant Valley Drive
Jacksonville, FL 32225

Name and Title: _____

Address: _____

Name and Title: Vice President - Brittney Rose

Address: 13733 Pleasant Valley Drive
Jacksonville, FL 32225

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Julie B. Wiechmann
Address: 13733 Pleasant Valley Drive
Jacksonville, FL 32225

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Julie B. Wiechmann
Address: 13733 Pleasant Valley Drive
Jacksonville, FL 32225

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

Julie B. Wiechmann

Required Signature/Registered Agent

7/28/2012

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Julie B. Wiechmann

Required Signature/Incorporator

7/28/2012

Date

12 JUL 30 PM 4:55
RECEIVED
FACILITY
FACILITY