

P14 DDDDD 24319

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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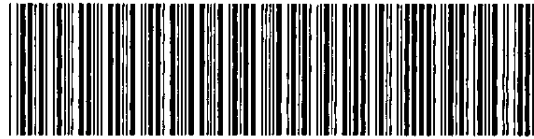
(Business Entity Name)

(Document Number)

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B 3/19/14



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 057610 12000A

AUTHORIZATION :

[Handwritten signature]

COST LIMIT : \$ 70.00

ORDER DATE : March 18, 2014

ORDER TIME : 2:53 PM **PLEASE FILE 1ST**

ORDER NO. : 057610-005

CUSTOMER NO: 12000A

DOMESTIC FILING

NAME: AZURE CONTEMPO EVENTS, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP
 ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 52956

EXAMINER'S INITIALS: _____

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: Azure Contempo Events, Inc.

ARTICLE II PRINCIPAL OFFICE Principal <u>street</u> address <u>2401 PGA Boulevard, Suite 272</u> <u>Palm Beach Gardens, FL 33410</u>	Mailing address, if different is: <u>2401 PGA Boulevard, Suite 272</u> <u>Palm Beach Gardens, FL 33410</u>
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ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Any and all lawful purposes.

ARTICLE IV SHARES 100
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Daren Houghtaling/P/VP/S/T</u> Address: <u>2401 PGA Boulevard, Suite 272</u> <u>Palm Beach Gardens, FL 33410</u>	Name and Title: _____ Address: _____
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Name and Title: _____	Name and Title: _____
Address: _____	Address: _____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____

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(conti.)

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Robert Lee Shapiro
Address: 2401 PGA Boulevard, Suite 272
Palm Beach Gardens, FL 33410

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Robert Lee Shapiro, P.A.
Address: 2401 PGA Boulevard, Suite 272
Palm Beach Gardens, FL 33410

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

Required Signature/Registered Agent

3/10/2014

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.

Required Signature/Incorporator

3/10/2014

Date