

P14 600050059

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

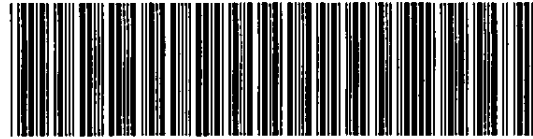
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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06/06/14--01013--013 **70.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JUN -6 PM 5:01

6/11/14

COVER LETTER

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

SUBJECT: Whitney Marie Photography 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

<input type="checkbox"/> \$78.75	<input type="checkbox"/> \$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status

ADDITIONAL COPY REQUIRED

FROM: Whitney Huffman
Name (Printed or typed)

14850 Aliso Rd
Address

Fort Myers, FLORIDA, 33913
City, State & Zip

239-410-1075
Daytime Telephone number

whitney_marielphotography@yahoo.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: Whitney Marie Photography Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

14850 Allico Rd

Fort Myers, FL

33913

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to engage in any activity within
the purposes for which corporations may be formed under
the business corporation act of Florida.

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ARTICLE IV SHARES

The number of shares of stock is: 60,000 common shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Whitney Huffman President Name and Title: Whitney Huffman Vice President

Address: 14850 Allico Rd Address: SAME
Fort Myers, FL
33913

Name and Title: Whitney Huffman Secretary Name and Title: Whitney Huffman Treasurer

Address: SAME Address: SAME

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

(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: Whitney Huffman

Address: 14850 Allico Rd

Fort Myers, FL, 33913

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Whitney Huffman

Address: 14850 Allico Rd

Fort Myers, FL, 33913

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

Whitney Huffman
Required Signature/Registered Agent

6-3-2014
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.

Whitney Huffman
Required Signature/Incorporator

6-3-2014
Date