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COVER LETTER

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

SUBJECT:	A	Memorable Moment Event Company
		(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

		•
□ \$78.75	\$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee,
& Certificate of Status	& Certified Copy	Certified Copy
		& Certificate of
		Status
	ADDITIONAL CO	PY REQUIRED
	Filing Fee	Filing Fee & Certificate of Status Filing Fee & Certified Copy

Marcelina Jones Name (Printed or typed)
1300 West 6th Street
Address
Riviera Beach, FL 33404
City, State & Zip
561-827-4933
Daytime Telephone number
amemorablemoment05@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)

<u> FICLE II PR</u>	INCIPAL OFFICE				ত্ৰ
	Principal street address		Mailing address, if diffe	rent is	
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	the corporation is organized is: to provi	de a servi	ice of event p	làni	ning
s purpose for which	uic corporation is organized is.	·			
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bove stated corporation at the place designated in sent and agree to act in this capacity
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