

P/50000/3669

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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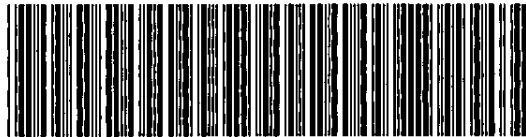
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
15 FEB - 2 PM 3:58

02/10/15

## COVER LETTER

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

**SUBJECT:** Events by Bride's Wearhouse

(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:** Events by Bride's Wearhouse

Name (Printed or typed)

5311 E Colonial Dr

Address

Orlando, FL 32807

City, State & Zip

407-282-3323

Daytime Telephone number

maribellabrides@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: Events by Bride's Wearhouse, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

5311 E. Colonial Drive

Orlando, FL 32807

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_

The Corporation shall engage in any activity or business permitted under the laws of the United States and of the State of Florida.

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**ARTICLE IV SHARES**

The number of shares of stock is: 10,000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: President: Maribel Lopez-Padilla

Name and Title: Secretary: Maribel Lopez-Padilla

Address 5311 East Colonial Drive.  
Orlando, Florida 32807

Address: 5311 East Colonial Drive.  
Orlando, Florida 32807

Name and Title: Treasurer: Maribel Lopez-Padilla

Name and Title: \_\_\_\_\_

Address 5311 East Colonial Drive.  
Orlando, Florida 32807

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

(cont.)

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: Maribel Lopez  
Address: 4979 Southfork Ranch Dr.  
Orlando, Florida 32812

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Maribel Lopez  
Address: 4979 Southfork Ranch Dr.  
Orlando, Florida 32812

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*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  
Date 1/26/15

*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  
Date 1/26/15