

P/5000053676

(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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15 JUN 18 PM 2:09
SECRETARY OF STATE
TALLAHASSEE, FL 32399-0001

JUN 23 2015

S. GILBERT

COVER LETTER

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

SUBJECT: Events by Maribel
(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 Maribel
Name (Printed or typed)
5311 E. Colonial Dr. Ste 101
Address
Orlando FL 32807
City, State & Zip
(407) 760-0747
Daytime Telephone number
Events by maribel@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: Events by maribel, Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5311 E COLONIAL Dr Ste 101
Orlando, FL 32807

4979 Southfork Ranch Dr
Orlando FL 32812

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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TALLAHASSEE, FLORIDA

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 E. Colonial Dr Ste 101 Address: 5311 E. Colonial Dr Ste 101
Orlando, FL 32807 Orlando, FL 32807.

Name and Title: Treasurer: Maribel Lopez Padilla Name and Title: _____
Address: 5311 E. Colonial Dr Ste 101 Address: _____
Orlando, FL 32807 _____

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

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 Padilla

Address: 4979 Southfork Ranch Dr
Orlando FL 32812

ARTICLE VII INCORPORATOR

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

Name: Maribel Lopez Padilla

Address: 4979 Southfork Ranch Dr
Orlando FL 32812

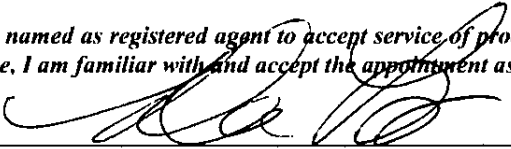
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

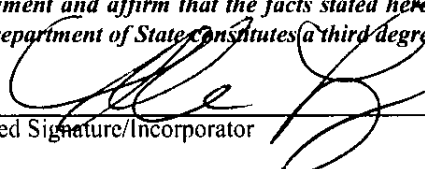


Required Signature/Registered Agent

6/15/15

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

6/15/15

Date