

P15000064465

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

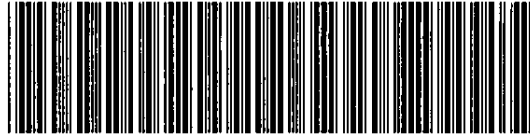
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/27/15--01036--012 **78.75

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15 JUL 27 AM 8:52

CLERK OF STATE
TALLAHASSEE, FLORIDA

15
7/31/15

COVER LETTER

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

Jessica Must Photography, Inc.

SUBJECT: _____
(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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Jessica Must

Name (Printed or typed)

3131 Laurel Ridge Court

Address

Bonita Springs, Florida 34134

City, State & Zip

(239)344-6229

Daytime Telephone number

jessicamust@comcast.net

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME Jessica Must Photography, Inc.
The name of the corporation shall be: _____

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ARTICLE II PRINCIPAL OFFICE
Principal street address
3131 Laurel Ridge Court
Bonnita Springs, Florida 34134

Mailing address, if different is: _____
CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE Specific purpose for a professional corporation of photography and de
The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES 10,000
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jessica Must, President Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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: Jessica Must _____

Address: 3131 Laurel Ridge Court _____

Bonita Springs, Florida 34134 _____

ARTICLE VII INCORPORATOR

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

Name: Jessica Must _____

Address: 3131 Laurel Ridge Court _____

Bonita Springs, Florida 34134 _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

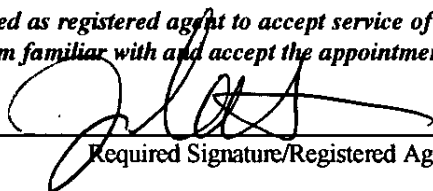
ARTICLE VIII EFFECTIVE DATE:

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

7/22/15
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

7/22/15
Date