

P15000072058

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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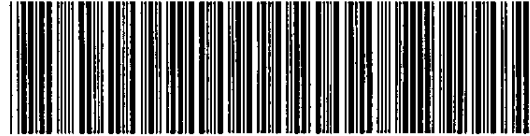
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COVER LETTER

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

SUBJECT: St Augustine Fashion Week 1 Co.
(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: Brittany Alphonso
Name (Printed or typed)

2112 Reef Drive
Address

St. Augustine, FL. 32080
City, State & Zip

904-669-9245
Daytime Telephone number

STAFW2016@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: St Augustine Fashion Week Co.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2112 Reef Drive
St Augustine, FL 32080

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To promote local
designers, restaurants, boutiques and artistic
talent. Raise money for charities and make
St. Augustine a fashion hub.

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Brittany Alphonso - President

Name and Title: Brittany Alphonso - President

Address

Address:

2112 Reef Drive
St Augustine FL 32080

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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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: Brittany Alphonso

Address: 2112 Reef Drive

St. Augustine FL 32080

ARTICLE VII INCORPORATOR

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

Name: Brittany Alphonso

Address: 2112 Reef Drive

St. Augustine FL 32080

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 8-15-15 (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

Brittany Alphonso
Required Signature/Registered Agent

8-15-15

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.

Brittany Alphonso
Required Signature/Incorporator

8-15-15

Date