## P16000040544

(Requestor's Name)				
(Address)				
(Add	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Do	cument Number)			
Certified Copies	Certificates	of Status		
Special Instructions to f	Filing Officer:			

Office Use Only



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SECRETARY OF STATE
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EFFECTIVE DATE 05/01/16

2 05/11/16

## **COVER LETTER**

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

SUBJECT: FOO	D FOR THOUGHT EVENT VENUE				
SUBJECT.	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u> I	JDE SUFFIX)		
Enclosed are an o	riginal and one (1) copy of the arti	cles 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		
		ADDITIONAL CO	Status		
			<del>-</del>		
FROM:	TERRY DEMINGS				
	Name (Printed or typed)				
1	746 EAST SILVER STAR ROAD SUI	TE 183			
-	Address				
C	DCOEE, FLOIRDA 34761				
	City, State & Zip				
4	07 925-7374				
	Daytime To	elephone number			
R	DEMINGS@AOL.COM				
	E-mail address: (to be used	for future annual report n	otification)		

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)

RTICLE II PRII	NCIPAL OFFICE Principal street address		Mailing address, if different is:		
01 WEST COLON	IIAL DRIVE STE. 542	1746 EA	ST SILVER STAR ROAD	STE.	183
COEE, FLORIDA	34761	OCOEE,	FLORIDA 34761		
RTICLE III PUR ne purpose for which	POSE h the corporation is organized is:	/IDE A VENUE WI	HERE CLIENTS CAN HOL	.D A	
ULTITUDE OF D	IFFERENT TYPES OF EVENTS FOR AL	L OCCASSIONS.			
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<del></del>	<u> </u>			77,12	<u> </u>
RTICLE IV SHA e number of shares				<u>-</u>	
e number of shares	Of stock is:  CIAL OFFICERS AND/OR DIRECTORS  DENIES DEMINGS/DP 55 (CEO)	Name and Title	TERRY DEMINGS/VIV	<del></del>	
e number of shares of shares of the shares of the share and Ti	Of stock is:  CIAL OFFICERS AND/OR DIRECTORS  DENIES DEMINGS/DP 55 (CEO)	Name and Title	TERRY DEMINGS/VIV	E PRES	
e number of shares	of stock is:  IAL OFFICERS AND/OR DIRECTORS  ILL: RENEE DEMINGS/PRES./CEO	Name and Title Address:		E PRES	
e number of shares of shares of shares of shares of share and Ti Address	IAL OFFICERS AND/OR DIRECTORS  IIe:  1746 EAST SILVER STAR ROAD  OCOEE, FLORIDA 34761	Address:	1746 EAST SILVER STAI OCOEE, FLORIDA 34761	E PRES	
e number of shares of shar	IAL OFFICERS AND/OR DIRECTORS  IIe:  1746 EAST SILVER STAR ROAD  OCOEE, FLORIDA 34761	Address: Name and Title:	1746 EAST SILVER STAI OCOEE, FLORIDA 34761	E PRES	
e number of shares of shares of shares of shares of share and Ti Address	IAL OFFICERS AND/OR DIRECTORS tle: RENEE DEMINGS/PRES./CEO 1746 EAST SILVER STAR ROAD OCOEE, FLORIDA 34761  CARLA WELCH/DIRECTOR	Address:	1746 EAST SILVER STAI OCOEE, FLORIDA 34761	E PRES	
e number of shares of shar	IAL OFFICERS AND/OR DIRECTORS  Ile: RENEE DEMINGS/PRES./CEO  1746 EAST SILVER STAR ROAD  OCOEE, FLORIDA 34761  OCOEE, FLORIDA 34761  KARLA WELCH/DIRECTOR  2828 HICKORY CREEK DRIVE	Address: Name and Title: Address:	1746 EAST SILVER STAI OCOEE, FLORIDA 34761	E PRES	·

Name	and Title:	Name and Title:
Addre	ess	Address:
	REGISTERED AGENT	Calculate and according
Name:	Florida street address (P.O. Box NOT acceptable) of TERRY DEMINGS	i the registered agent is:
Address:	1746 EAST SILVER STAR ROAD STE. 183	
	OCOEE, FLORIDA 36761	<del>න</del> ශිලි ම පිලි
ARTICLE VII	INCORPORATOR	
The name and	address of the Incorporator is:	
Name:	TERRY DEMINGS	: A
Address:	1746 EAST SILVER STAR ROAD STE.	ఆంగ్ చే
	OCOEE, FLORIDA 36761	_
Effective date,		. (OPTIONAL) of the more than five business days prior or 90 business
	te inserted in this block does not meet the applicable effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as
Having been no this certificate,	amed as registered agent to accept service of process I am familiar with and accept the appointment as reg	s for the above stated corporation at the place designated in gistered agent and agree to act in this capacity
	Required Signature/Registered Agent	
document to the	ocument and affirm that the facts stated herein are to be Department of State constitutes a third degree felong ulred Signature/Incorporator	true. I am aware that the false information submitted in a sy as provided for in s.817.155, F.S.
Req	unca aignature/meorporator	Date