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(Business Entity Name)

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17 MAR -3 PM 3:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

 03/07/17

COVER LETTER

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

SUBJECT: ShadowLit Photography Inc.

(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: William Musante

Name (Printed or typed)

16960 Alico Mission Way #102-275

Address

Fort Myers, Florida 33908

City, State & Zip

239-565-3188

Daytime Telephone number

shadowlitphoto@comcast.net

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: ShadowLit Photography Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
16960 Alico Mission Way #102-275

Fort Myers, Florida 33908

Mailing address, if different is:

N/A

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Formation of a small photography business.

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TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: William Musante, President

Address: 16960 Alico Mission Way #102-275
Fort Myers, Florida 33908

Name and Title: N/A

Address: _____

Name and Title: N/A

Address: _____

Name and Title: N/A

Address: _____

Name and Title: N/A

Address: _____

Name and Title: N/A

Address: _____

Name and Title: N/A Name and Title: N/A
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: William Musante
Address: 16960 Alico Mission Way #102-275
Fort Myers, Florida 33908

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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: William Musante
Address: 16960 Alico Mission Way #102-275
Fort Myers, Florida 33908

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: N/A (OPTIONAL)

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

[Signature]
Required Signature/Registered Agent

02/27/2017

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.

[Signature]
Required Signature/Incorporator

02/27/2017

Date