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(Business Entity Name)

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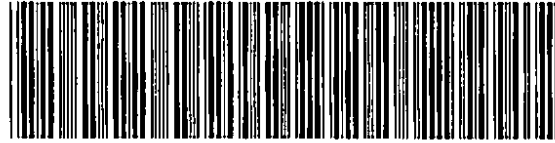
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CLERK OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: SPECTRUM EVENTS, 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: DAN BILZOR
Name (Printed or typed)

2108 MISSION DR.
Address

NAPLES FL 34109
City, State & Zip

404 422 7381
Daytime Telephone number

dbilzor@yahoo.com
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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TALLAHASSEE, FLORIDA

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: SPECTRUM EVENTS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2108 MISSION DR.

NAPLES, FL 34109

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: an event management company.

This includes, but is not limited to, managing
events, catering, and consulting

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Dan Bilzor / President

Address: 2108 MISSION DR
NAPLES FL 34109

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

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: DAN BILZOR

Address: 2108 MISSION DR

NAPLES FL 34109

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NAPLES, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: DAN BILZOR

Address: 2108 MISSION DR

NAPLES FL 34109

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 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

DUB

Required Signature/Registered Agent

1/18/18
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.

DUB

Required Signature/Incorporator

1/18/18
Date