

P18 000 031 874

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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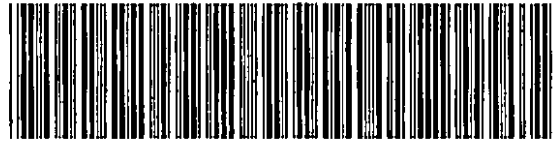
(Business Entity Name)

(Document Number)

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SECRETARY
TALLAHASSEE, FL

D O'KEEFE

APR 09 2018

COVER LETTER

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

SUBJECT: TARA J. WEDDINGS, INCORPORATED

(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: TARA J. WEDDINGS, INCORPORATED

Name (Printed or typed)

1736 SOUTHEAST 14TH AVENUE

Address

GAINESVILLE, FLORIDA 32641

City, State & Zip

352-301-1763

Daytime Telephone number

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: TARA J. WEDDINGS, INCORPORATED

ARTICLE II PRINCIPAL OFFICE

Principal street address
1736 SOUTHEAST 14TH AVENUE
GAINESVILLE, FLORIDA 32641

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TARA J. WEDDINGS, INCORPORATED IS AN
EXQUISITE WEDDING PLANNING AND ARRANGEMENT ESTABLISHMENT WHICH FEATURES THE
THE MOST EXCLUSIVE SERVICES TO ATTEND TO EVERY INTRICATE DESIRE OF WEDDING COORDINATION.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: TARA CRAWFORD JAMES

Name and Title: _____

Address: PRESIDENT

Address: _____

1736 SOUTHEAST 14TH AVENUE

GAINESVILLE, FLORIDA 32641

Name and Title: AUDREY CRAWFORD

Name and Title: _____

Address: SECRETARY

Address: _____

18011 SOUTHWEST 183RD AVENUE

ARCHER, FLORIDA 32618

Name and Title: ANDRE BUIE

Name and Title: _____

Address: TREASURER

Address: _____

1033 SOUTHEAST 2ND DRIVE

CHIEFLAND, FLORIDA 32626

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TALLAHASSEE, FL

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: TARA CRAWFORD JAMES
Address: 1736 SOUTHEAST 14TH AVENUE
GAINESVILLE, FLORIDA 32641

ARTICLE VII INCORPORATOR

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

Name: AUDREY CRAWFORD
Address: 18011 SOUTHWEST 183RD AVENUE
ARCHER, FLORIDA 32618

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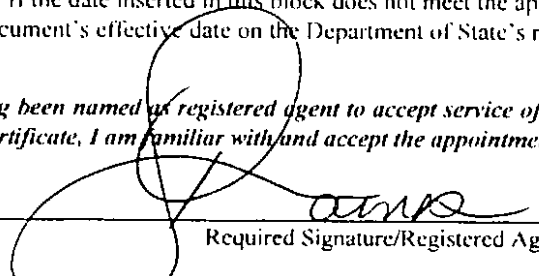
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 3/29/18 (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


Required Signature/Registered Agent

3/29/18
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.


Required Signature/Incorporator

3/29/18
Date

3/24/18

P16000041398

Tara J. Wedding Inv.

I will no longer use P16000041398
for my business Tara J. Wedding Inv.
Please remove it from the
site.

Tara J.
3/29/18