

# P19000031308

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

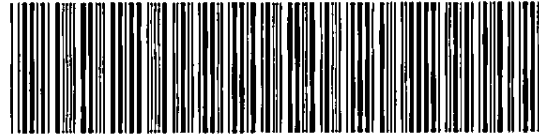
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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04/15/19--01005--004 \*\*18.75

04/15/19--01005--003 \*\*60.00

19 APR 15 AM 9:25

FILED  
2019 APR 15 AM 9:23  
CLERK OF COURT

COVER LETTER

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

SUBJECT: Shunny Pooh 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**

Shun tel  
FROM: Shuniel Murray  
Name (Printed or typed)  
3207  
Westgate Court room 3  
Address  
Tallahassee FL, 32304  
City, State & Zip  
(850) 694-8364  
Daytime Telephone number  
lavorismurray@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: Shunny Peoh Photography inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3207 westgate court room 3  
Tallahassee FL 32304

3207 westgate court room 3  
Tallahassee FL 32304

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Photography

FILED  
2015  
JAN 15  
11:53:28  
TALLAHASSEE, FL  
CLERK OF CIRCUIT COURT

ARTICLE IV SHARES

The number of shares of stock is: (77)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Shunkel Murry CEO Name and Title: \_\_\_\_\_

Address: 3207 westgate court Address: \_\_\_\_\_  
room 3, Tallahassee FL  
32304

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

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: Shuntel Murray  
Address: 3207 Westgate Court room 3  
Tallahassee FL 32304

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Shuntel Murray  
Address: 3207 Westgate Court room 3  
Tallahassee FL 32304

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 4/15/19 (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

Shuntel Murray  
Required Signature/Registered Agent

4/15/19  
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.

Shuntel Murray  
Required Signature/Incorporator

4/15/19  
Date

FILED  
2019 APR 15 PM 5:29  
CLERK OF THE COURT  
TALLAHASSEE, FLORIDA