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Email Address: LEESLATKYCPA@OPTONLINE.NET

**FLORIDA PROFIT/NON PROFIT CORPORATION  
WEDDING SALON EVENTS INC**

Certificate of Status	1
Certified Copy	0
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## ARTICLES OF INCORPORATION

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

### ARTICLE I NAME

The name of the corporation shall be:

**WEDDING SALON EVENTS INC**

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

5900 OLD OCEAN BLVD, UNIT C8  
OCEAN RIDGE, FL 33435

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,500 SHARES AT NO PAR VALUE

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

TATIANA BYRON  
5900 OLD OCEAN BLVD, UNIT C8  
OCEAN RIDGE, FL 33435

Prepared By:

Bruce B. Hubbard

238 W. Jericho Turnpike

Huntington Sta., NY 11746

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**ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)**

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

**TATIANA BYRON - PRESIDENT / DIRECTOR  
5900 OLD OCEAN BLVD, UNIT C8, OCEAN RIDGE, FL 33435**


**ARTICLE VI INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

**TATIANA BYRON  
5900 OLD OCEAN BLVD, UNIT C8, OCEAN RIDGE, FL 33435**

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

28TH day of MAY 2021

  
\_\_\_\_\_  
**TATIANA BYRON**  
Signature

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LA WS OF THE ST ATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **WEDDING SALON EVENTS INC**

2. The name and address of the registered agent and office is:

**TATIANA BYRON**

Name

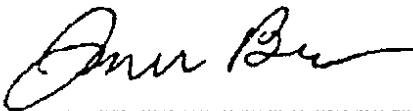
**5900 OLD OCEAN BLVD, UNIT C8**

(P.O. Box or Mail Drop Box NOT Acceptable)

**OCEAN RIDGE, FL 33435**

(City / State / Zip)

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.*



**TATIANA BYRON**  
SIGNATURE

**MAY 28, 2021**

(Date)

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