

P95000061270

TRANSMITTAL LETTER

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

600001544836  
-07/25/95--01031--016  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: "The Wedding Card," Inc.  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

FROM: Lynda S. Gordon  
Name (printed or typed)

P.O. Box 1992  
Address

Coconut Grove FL 33233  
City, State & Zip

(305) 859-9675  
Daytime Telephone number

AUG 9 1995

691

W95-15095

FILED  
95 AUG -8 AM 8:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.



**FLORIDA DEPARTMENT OF STATE**  
**Sandra B. Mortham**  
Secretary of State

July 27, 1995

LYNDA S. GORDON  
P. O. BOX 1992  
COCONUT GROVE, FL 33233

SUBJECT: "THE WEDDING CARD", INC.  
Ref. Number: W95000015095

We have received your document for "THE WEDDING CARD", INC. and check(s) totaling \$76.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must state the number of shares of authorized stock.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6925.

Brenda Baker  
Corporate Specialist

Letter Number: 895A00035636

**ARTICLES OF INCORPORATION**

FILED

95 AUG 8 AM 8:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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:

"The Wedding Card," Inc.

**ARTICLE II PRINCIPAL OFFICE**

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

Mailing →

P.O. Box 1992  
COCONUT GROVE, FL 33233

Office →

1 GROVE ISLE DRIVE # 1003  
COCONUT GROVE, FL 33133

**ARTICLE III SHARES**

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

100 Shares

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

LYNDA S. GORDON

1 GROVE ISLE DRIVE # 1003  
COCONUT GROVE, FL 33133

**ARTICLE V INCORPORATOR(S)**

**See instructions for officers/directors**

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

① LYNDIA S. GORDON, PRESIDENT  
1 GROVE ISLE DRIVE #1003  
COCONUT GROVE, FL 33133

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

20th day of July, 19 95.

Lyndia S. Gordon  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**NOTE:** Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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

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

1. The name of the corporation is:

"The Wedding Card", Inc.

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

Lynda S. Gordon  
(NAME)

1 GROVE ISLE DRIVE # 1003  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

COCONUT GROVE, FL 33133  
(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 statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Lynda S. Gordon  
(SIGNATURE)

7-20-95  
(DATE)