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Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 SUBJECT:	Nedding Perfe		SECRETAKTOF STATE TALLAHASSEE, FLORIDA 2000 000 000 000 000 000 000 000 000 0	97 AUG 18 AH II: 36	
		. 6	-08/18/976		
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 COI	PY REQUIRED		
FROM:	Joyce I Name (Pr	, Clarke			
629 Midiron Drive					
_	Poinciana City,	5 FL 347 State & Zip	59		
407 - 396 - 8929 Daviling Telephone number					

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

ne 8/20/97

FILED

ARTICLES OF INCORPORATION

97 AUG 18 AN II: 36

The undersigned incorporator for the purpose of forming a corporation under the Florida SECRETATE OF STATE Business Corporation Act. hereby adopts the following Articles of Incorporation.

TALLAHASSEE, FLORIDA

ARTICLE I	NAME
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The name of the corporation shall be:

Wedding Perfecters, Inc.

PRINCIPAL OFFICE

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

Midiron Drive Poinciana, FL 34759

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

629 Widikon Dr. KIESIMMER, POINCIANT 3134759

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Joyce I. Clarke

DR.

Penciana, FL 34759

august 13, 1997

(An additional article must be added if an effective date is requested.)

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

Signature/Registered Agent