

TRANSMITTAL LETTER

P98000107151

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

500002674255--6
-10/28/98-01043-014
****122.50 *****78.75

SUBJECT: _____

(Proposed corporate name - must include suffix)

100002723921--8
-12/29/98-01001-005
****137.50 *****93.75

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 of Status

☐ \$78.75 Filing Fee & Certified Copy

☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: _____

Champagne Bridal Atelier
603 E. Vine Street
Kissimmee, FL 34743

City, State & Zip

98 DEC 28 PM 4:03
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

70.00
Cert 8.75
RTNCK 15.00

Daytime Telephone number _____

GAVE
AUTHORIZATION BY PHONE TO
CORRECT LA. add.
DATE 11-25-98
DQC. EXAM CB

DEC 24 1998

SHARON

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

OB
11-25-98
5



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

December 3, 1998

GRISELA PEREZ
602 E. VINE STREET
KISSIMMEE, FL 34743

SUBJECT: CHAMPAGNE BRIDALS ATELIER, INC.
Ref. Number: W98000024547

Memo #: 91664-C

This letter is to inform you that your check number 1099 for \$122.50, which was dated October 19, 1998 and submitted for CHAMPAGNE BRIDALS ATELIER, INC. has been returned to us by your bank because of Nonsufficient Funds.

We are notifying you because our records indicate that the paperwork for CHAMPAGNE BRIDALS ATELIER, INC. has not been filed and was returned to you because of deficiencies in the document. If you send the document back to us to be filed, be sure to enclose a cashier's check or money order in the amount of \$137.50. This will cover the unpaid check and also the service fee required by law under section 215.34, Florida Statutes.

When sending the cashier's check or money order, please indicate that it is a replacement for the returned check mentioned above. Also, please include in your response the Debit Memo number given above. Send your response to:

Division of Corporation
Attn: C. Batten
P.O. Box 6327
Tallahassee, FL 32314

If you have any questions you may contact me at (850) 487-6900.

Melinda Lilliston
Administrative Assistant
Bureau of Commercial Recording



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

November 25, 1998

GRISELA PEREZ
602 E. VINE STREET
KISSIMMEE, FL 34743

SUBJECT: CHAMPAGNE BRIDALS ATELIER, INC.
Ref. Number: W98000024547

We have received your document for CHAMPAGNE BRIDALS ATELIER, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

The registered agent must have a Florida street address. A post office box is not acceptable.

Please list a Florida address for the Registered Agent.,

Please return the original and one copy of 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 (850) 487-6930.

Carolyn Batten
Document Specialist

Letter Number: 898A00053040

ARTICLE OF INCORPORATION
OF
CHAMPAGNE BRIDALS ATELIER, INC.

FILED
98 DEC 28 PM 4:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

THE UNDERSIGNED INCORPORATIOS, FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA GENERAL CORPORATION ACT, HERBY ADOPT THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE 1 - NAME

THE NAME OF THE CORPORATION SHALL BE:

CHAMPAGNE BRIDALS ATELIER, INC.

THE PRINCIPAL OFFICE OF THIS CORPORATION SHALL BE:

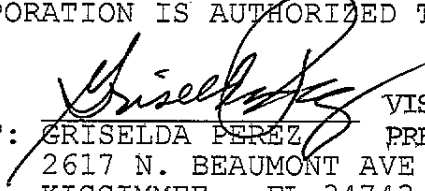
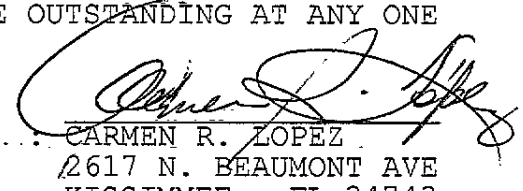
602 VINE STREET
KISSIMMEE, FL 34743

ARTICLE II - NATURE OF BUSINESS

THIS CORPORATION MAY ENGAGE IN OR TRANSACT ANY OR ALL LAWFUL ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES, THE STATE OF FLORIDA, OR ANY OTHER STATE, COUNTRY, TERRITORY, OR NATION.

ARTICLE III - CAPITAL STOCK

THE AGGREGATE NUMBER OF SHARES OF STOCK AND ITS PAR VALUE THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

PRESIDENT:  VICE PRESIDENT: 
GRISELDA PEREZ CARMEN R. LOPEZ
2617 N. BEAUMONT AVE 2617 N. BEAUMONT AVE
KISSIMMEE, FL 34743 KISSIMMEE, FL 34743

FIFTY (50) SHARES OF COMMON STOCK EACH SHAREHOLDER, HAVING A PAR VALUE OF ONE (\$1.00) DOLLAR PER SHARE.

ARTICLE IV - TERM OF EXISTENCE

THIS CORPORATION IS TO EXIST PERPETUALLY.

PAGE - 2 -

ARTICLE V - OFFICERS/DIRECTORS

THE NAME AND ADDRESS OF THE INITIAL OFFICER AND DIRECTOR WHO SHALL HOLD OFFICE THE FIRST YEAR OF THE CORPORATION'S EXISTENCE OR UNTIL THEIR SUCCESSORS ARE ELECTED ARE:

GRISELDA PEREZ
2617 N. BEAUMONT AVENUE
KISSIMMEE, FL 34743

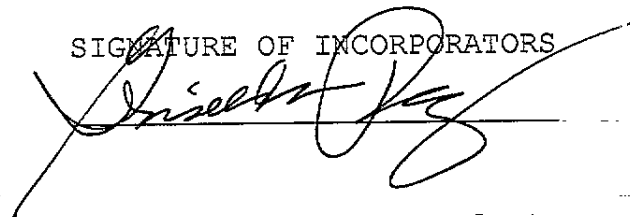
ARTICLE VI - INCORPORATORS

THE NAME AND STREET ADDRESS OF THE INCORPORATORS TO THESE ARTICLES OF INCORPORATION ARE:

GRISELDA PEREZ
2617 N. BEAUMONT AVENUE
KISSIMMEE, FL 34744

IN WITNESS WHEREOF, THE UNDERSIGNED INCORPORATORS HAVE EXECUTED THESE ARTICLES OF INCORPORATIONS AT THIS 7 DAY OF December 1998.

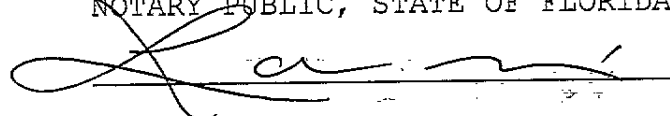
SIGNATURE OF INCORPORATORS



STATE OF FLORIDA
COUNTY OF OSCEOLA

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED AND SWORN TO BEFORE ME THIS 7 DAY OF December, 1998.

NOTARY PUBLIC, STATE OF FLORIDA



(SEAL)

CERTIFICATION DESIGNATING
REGISTERED AGENT/REGISTERED OFFICE

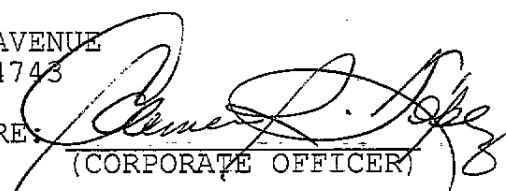
PURSUANT TO THE REQUIREMENTS OF SECTION 607.034 AND 607.325,
FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER
THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT
IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE
STATE OF FLORIDA.

- 1- THE NAME OF THE CORPORATION IS:

CHAMPAGNE BRIDALS ATELIER, INC.
602 E. VINE STREET
KISSIMMEE, FL 34743

- 2- THE NAME AND ADDRESS OF THE REGISTERED AGENT
AND OFFICE IS:

CARMEN R. LOPEZ
2617 N. BEAUMONT AVENUE
KISSIMMEE, FL 34743

SIGNATURE: 

(CORPORATE OFFICER)

TITLE: VICE-PRESIDENT

DATE: 12 / 07 /1998.

HAVING BEEN NAMED TO ACCEPT SERVICES OF PROCESS FOR THE ABOVE
STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE,
I HEREBY ACCEPT TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO
COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER
AND COMPLETE PERFORMANCE OF MY DUTIES AND I ACCEPT THE DUTIES AND
OBLIGATIONS OF THE ABOVE MENTIONED FLORIDA STATUTES

SIGNATURE: 

(RESIDENT AGENT)

DATE: 12 / 07 /1998.

FILED
98 DEC 28 PM 4:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA