

PD8000085904

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

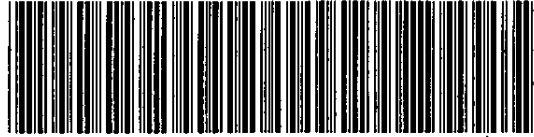
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
9/18

COVER LETTER

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

SUBJECT: International Indie, Incorporated
(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

FROM: Younes Abdessamad
Name (Printed or typed)

8721 Zia Bella Notte
Address

Orlando, Florida 32836
City, State & Zip

407-468-4388
Daytime Telephone number

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:

International Indie, Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

8721 Zia Bella Notte, Orlando, Florida 32836

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Record Label, Music Entertainment

ARTICLE IV SHARES

The number of shares of stock is:

100 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Younes Abdessamad
8721 Zia Bella Notte, Orlando, Florida 32836
Executive Director

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

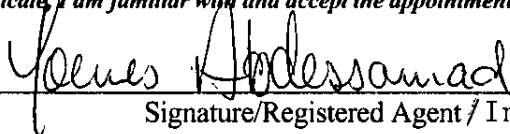
Younes Abdessamad
8721 Zia Bella Notte, Orlando, Florida 32836
Executive Director

ARTICLE VII INCORPORATOR

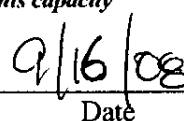
The name and address of the Incorporator is:

Younes Abdessamad
8721 Zia Bella Notte, Orlando, Florida 32836
Executive Director

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



Signature/Registered Agent/Incorporator



Date

Signature/Incorporator

Date

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA