

P300020637

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

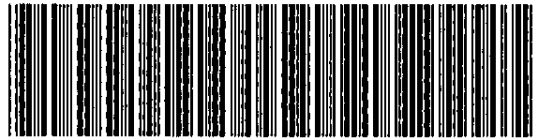
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/04/13--01046--017 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 MAR -4 PM 1:18

Ps 3/5/13

COVER LETTER

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

SUBJECT: 162 PRODUCTIONS INC

(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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: SJ COOPER & ASSOCIATES

Name (Printed or typed)

3269 STURGRON BAY COURT

Address

NAPLES, FL 34120

City, State & Zip

239-398-3637

Daytime Telephone number

steven@sjcfinance.com

E-mail address: (to be used for future annual report notification)

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)

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ARTICLE I NAME 162 PRODUCTIONS INC
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address

4001 SANTA BARBARA BLVD
366
NAPLES, FL 34104

Mailing address, if different is:

ARTICLE III PURPOSE PROFESSIONAL CORPORATION
The purpose for which the corporation is organized is:

ARTICLE IV SHARES 100
The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>STEVE MELIA</u>	Name and Title:	_____
Address	<u>826 BLUE POINT DR</u>	Address:	_____
	<u>WILMINGTON, NC 28411</u>		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____

13 MAR -4 PM 1: 18

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

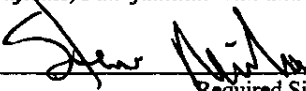
Name: STEVEN COOPER /SJCOOPER &ASSOCIATES
Address: 3269 STURGEON BAY COURT
NAPLES, FL 34120

ARTICLE VII INCORPORATOR

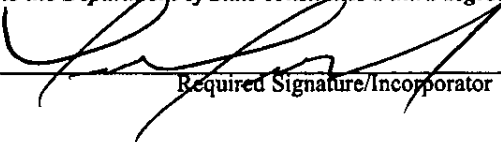
The **name and address** of the Incorporator is:

Name: LYNN BLOODGOOD
Address: 3269 STURGEON BAY CT
NAPLES, FL 34120

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

 02/23/2013
Required Signature/Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

 02/23/2013
Required Signature/Incorporator Date