

P 15.000027012

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

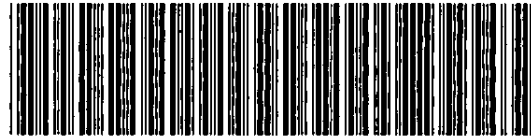
(Document Number)

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01/15/15--01002--005 **78.75

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15 MAR 19 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[Signature] 3/23/15

COVER LETTER

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

SUBJECT: Hope Productions Corp.

(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: Hope Productions Corp.

Name (Printed or typed)

9960 SW 47 Street

Address

Miami, FL 33165

City, State & Zip

(305) 588-0553

Daytime Telephone number

martallerena@yahoo.com

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

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 MAR 19 PM 2:40
FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

15 MAR 19 PM 12:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

January 20, 2015

HOPE PRODUCTIONS CORP.
9960 SW 47 STREET
MIAMI, FL 33165

SUBJECT: HOPE PRODUCTIONS CORP.
Ref. Number: W15000004028

We have received your document for HOPE PRODUCTIONS CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected 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) 245-6052.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 215A00001143

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15 MAR 19 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME Hope Productions Corp.
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
Principal street address
9960 SW 47 Street
Miami, FL 33165

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TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE Everything related to the business of media activity
The purpose for which the corporation is organized is: _____

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	Marta LLerena / President	Name and Title:	_____
Address	9960 SW 47 Street	Address:	_____
	Miami, FL 33165		_____

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

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

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: Marta LLerena
Address: 9960 SW 47 Street
Miami, FL 33165

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Marta LLerena
Address: 9960 SW 47 Street
Miami, FL 33165

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

Required Signature/Registered Agent 1/12/15
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.

Required Signature/Incorporator 1/12/15
Date

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TALLAHASSEE, FLORIDA