

P16000089071

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

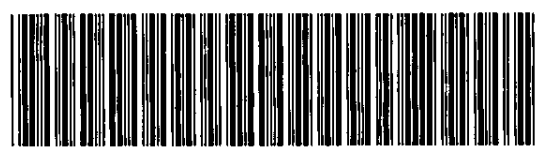
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2016 NOV - 1 PM 5:25
STATE
TALLAHASSEE, FLORIDA

V HERRING
NOV - 7 2016

COVER LETTER

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

SUBJECT: Magic Makers Entertainment, 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

\$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: Richard Ribuffo Richard Ribuffo
Name (Printed or typed)

4211 121st Terrace North
Address

Royal Palm Beach, FL 33411
City, State & Zip

877-210-1882
Daytime Telephone number

richardribuffo@gmail.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 Magic Makers Entertainment, Inc.
The name of the corporation shall be: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE
Principal street address _____

Mailing address, if different is: _____

4211 121st Terrace North

Royal Palm Beach, FL 33411

ARTICLE III PURPOSE This Corporation may engage or transact in any or all lawful activities
The purpose for which the corporation is organized is: _____
permitted under the laws of the United States, the State of Florida, or any other state, county, territory or union.

ARTICLE IV SHARES 1,000
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Richard Ribuffo, President Name and Title: _____

Address 4211 121st Terr North Address: _____

Royal Palm Beach, FL 33411 _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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Name and Title: Richard Ribuffo - OWNER

Name and Title: _____

2016 NOV - 1 PM 5: 25

Address

4211 121st Terrace North

Address: _____

Royal Palm Beach, FL 33411

SECRETARY OF STATE
PALM BEACH, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: Richard Ribuffo
Address: 4211 121st Terrace North
Royal Palm Beach, FL 33411

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Richard Ribuffo
Address: 4211 121st Terrace North
Royal Palm Beach, FL 33411

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

10/31/16
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

10/31/16
Date