

P 17000034922

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

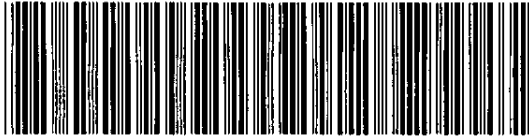
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

2590-613-



300297217243

04/14/17--01003--015 **70.00

FILED

2017 APR 14 PM 4: 56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

2017 APR 14 AM 11: 27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. GOLDEN

APR 18 2017

SUNSHINE CORPORATE
3458 Lakeshore Drive, Tallahassee, FL 32312
850-656-4724
850-508-1891 (cell)

4-14-17

Name:	Chrisley Productions Inc
Document #:	Natalie Paraneet
Order #:	

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing:	<input checked="" type="checkbox"/>	Certified:	<input type="checkbox"/>
		Plain:	<input checked="" type="checkbox"/>
		COGS:	<input type="checkbox"/>

Availability	_____
Document	_____
Examiner	_____
Updater	_____
Verifier	_____
W.P. Verifier	_____
Ref#	_____

Amount: \$	70.00
------------	-------

2017 APR 14 PM 4:56
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILED

Thank you!

COVER LETTER

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

SUBJECT: Chrisley 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

\$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: Bass Berry & Sims
Name (Printed or typed)

150 3rd Avenue South Ste 2800
Address

Nashville, TN 37201
City, State & Zip

Daytime Telephone number

robinrossfleming@gmail.com
E-mail address: (to be used for future annual report notification)

FILED
2017 APR 14 PM 4:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

FILED

2017 APR 14 PM 4:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

April 17, 2017

SUNSHINE CORPORATE

SUBJECT: CHRISLEY PRODUCTIONS, INC.
Ref. Number: W17000032898

*Please file
and give
the initial
file date.
Thanks!
eg*

We have received your document for CHRISLEY PRODUCTIONS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as incorporator in the document and the person signing as incorporator must be the same.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

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: 317A00007412

2017 APR 18 PM 1:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

FILED

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

2017 APR 14 PM 4:56

ARTICLE I NAME
The name of the corporation shall be: Chrisley Productions, Inc.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE
Principal street address

Mailing address, if different is:

11924 Forest Hill Blvd., Suite 10A-179

West Palm Beach, FL 33414

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business

ARTICLE IV SHARES
The number of shares of stock is: 3,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Todd Chrisley, President, VP, Director

Name and Title: _____

Address 11924 Forest Hill Blvd., Suite 10A-179

Address: _____

West Palm Beach, FL 33414

Name and Title: Robin Fleming, Secretary/Treasurer

Name and Title: _____

Address 11924 Forest Hill Blvd., Suite 10A-179

Address: _____

West Palm Beach, FL 33414

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: Robin Fleming
 Address: 11924 Forest Hill Blvd., Suite 10A-179
West Palm Beach, FL 33414

2017 APR 14 PM 4: 56
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 FILED

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

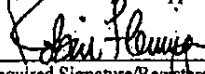
Name: Robin Fleming
 Address: 11924 Forest Hill Blvd., Suite 10A-179
West Palm Beach, FL 33414

ARTICLE VIII EFFECTIVE DATE:


Effective date, if other than the date of filing: April 13, 2017 (OPTIONAL)
 (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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

By:  4/13/2017
 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.

 4/13/2017
 Required Signature/Incorporator Date