

NO6000008595

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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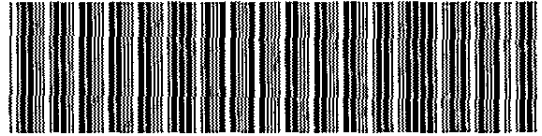
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

SUBJECT: His Players Drama, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

ADDITIONAL COPY REQUIRED

FROM: Lorri Murphy
Name (Printed or typed)

6311 Farragut Street
Address

Hollywood, FL 33024
City, State & Zip

954-961-1511
Daytime Telephone number

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

ARTICLES OF INCORPORATION
In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

His Players Drama, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

6311 Farragut Street
Hollywood, FL 33024

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

provide exposure to the arts and drama experiences for
the children of the homeschool community

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

as stated in the by-laws

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Lorri Murphy, President
6311 Farragut Street
Hollywood, FL 33024

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Lorri Murphy
6311 Farragut Street
Hollywood, FL 33024

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lorri Murphy
6311 Farragut Street
Hollywood, FL 33024

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

Signature/Incorporator

8/7/06

Date

8/7/06

Date

FILED
06 AUG 14 AM 9:27
SECRETARY OF STATE
TALLAHASSEE FLORIDA