

P 000000 24577

TRANSMITTAL LETTER

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

300003156843--E
-03/03/00--01039--009
*****78.75 *****78.75

SUBJECT: HEGYPSHE, INC.
(Proposed corporate name - must include suffix)

FILED
00 MAR -3 PM 2:42
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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 of
Status

ADDITIONAL COPY REQUIRED

FROM: Benny Von Bennett
Name (Printed or typed)
369 NW 46th Ave
Address
Deerfield Beach, Fla 33442
City, State & Zip
(954) 427-8910
Daytime Telephone number

F. C. C. MAR 9 2000

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)

ARTICLE I NAME

The name of the corporation shall be: Hegypshe, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

369 NW 46th Ave
Deerfield Beach, Fla 33442

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Music + Sales

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es):

Benny Van Benne H, President
369 NW 46th Ave
Deerfield Beach, Fla 33442

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent are:

Benny Van Benne H
369 NW 46th Ave
Deerfield Beach, Fla 33442

ARTICLE VII INCORPORATOR

The name and address of the Incorporator are:

Hegypshe, Inc
369 NW 46th Ave
Deerfield Beach, Fla 33442

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

x Benny Van Benne H
Signature/Registered Agent

2/29/00

Date

x Benny Van Benne H
Signature/Incorporator

2/29/00

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA