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TRANSMITTAL LETTER

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

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-07/10/00--01110--013
*****87.50 *****87.50

SUBJECT:

Winged Dog Productions, 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 of
Status

ADDITIONAL COPY REQUIRED

FROM:

Diane Foti
Name (Printed or typed)

317 Lake Placid Ct.
Address

Oldsmar, Florida 34677
City, State & Zip

813-855-4185
Daytime Telephone number

00 JUL 10 PM 3:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

7-12-00
2

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:

Winged Dog Productions, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 21583
ST PETERSBURG, FL. 33642

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

A Film, Video & Print Production Company

ARTICLE IV SHARES

The number of shares of stock is:

\$ 100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Diane Foti - 317 Lake Placid Ct. Oldsmar FL. 34677 Pres./Sec
Marlene Forand PO Box 21583 ST PETERSBURG, FL. 33642 Vice Pres.

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

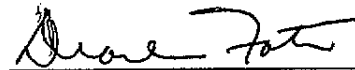
Diane Foti 317 Lake Placid Ct. Oldsmar, FL. 34677

ARTICLE VII INCORPORATOR

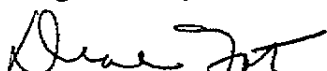
The name and address of the Incorporator is:

Diane Foti
317 Lake Placid Ct. Oldsmar, FL. 34677

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

Date


Signature/Incorporator

Date

FILED
00 JUL 10 PM 3:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA