

PO0000086285

TRANSMITTAL LETTER

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

EFFECTIVE DATE

9/8/00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

00 SEP 11 PM 3:03

FILED

SUBJECT: APPLE PIE PRODUCTIONS, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

400003389034--0

-09/11/00--01141--010

Enclosed is an original and one(1) copy of the articles of incorporation and a check for \*\*\*\*\*87.50 \*\*\*\*\*87.50

☐ \$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: SUSAN M. LUPIN  
Name (Printed or typed)

1000 PONCE DE LEON BLVD., SUITE 306  
Address

CORAL GABLES, FLORIDA 33134  
City, State & Zip

305-529-0473  
Daytime Telephone number

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

Feb 9/12

EFFECTIVE DATE

9/8/00

ARTICLES OF INCORPORATION  
OF  
APPLE PIE PRODUCTIONS, INC.

FILED  
00 SEP 11 PM 3:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE I  
CORPORATE NAME

The name of the Corporation is:  
APPLE PIE PRODUCTIONS, INC.

ARTICLE II  
DURATION

This Corporation shall have perpetual existence commencing on the date of execution and acknowledgement of these Articles of Incorporation.

ARTICLE III  
NATURE OF CORPORATE BUSINESS

The Corporation may engage in or transact any or all activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE IV  
CAPITAL STOCK

The Corporation is authorized to issue and have outstanding at any one time an aggregate number of Three Thousand (3,000) shares of one class of common stock having a par value of One Dollar (\$1.00) per share. The consideration to be paid for each share of stock shall be fixed by the Board of Directors.

ARTICLE V  
INITIAL CAPITAL

The initial capital of the corporation shall be \$3,000.00

ARTICLE VI  
PREEMPTIVE RIGHTS

All shareholders of the Corporation shall be vested with full preemptive rights.

ARTICLE VII  
PLACE OF BUSINESS AND REGISTERED OFFICE AND AGENT

The address of the place of business and the initial registered office of the Corporation is:

1000 Ponce de Leon Blvd., suite 306  
Coral Gables, Florida 33134

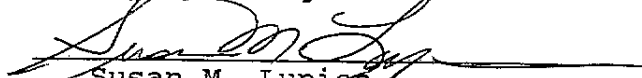
and the initial Resident Agent is

Susan M. Lupien

2011

ACKNOWLEDGEMENT AND CONSENT OF THE REGISTERED AGENT

Having been named Initial Registered Agent to accept service of process on the Corporation at the Initial Registered Office designated in these Articles of Incorporation, I hereby accept such status and consent to act in this capacity and agree to comply with all the requirements of law pertaining thereto.

  
Susan M. Lupien

ARTICLE VIII

INITIAL BOARD OF DIRECTORS

The number of Directors constituting the initial Board of Directors is one (1).

ARTICLE IX

INITIAL DIRECTORS

The name and address of the member of the initial Board of Directors is:

Susan M. Lupien  
1000 Ponce de Leon Blvd., Suite 306  
Coral Gables, Florida 33134

ARTICLE X

INDEMNIFICATION

The Corporation shall indemnify any officer or director or any former officer or director to the full extent permitted by law.

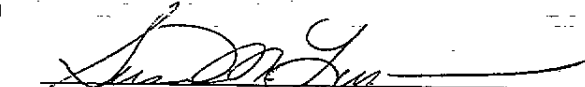
ARTICLE XI

INCORPORATOR

The name and address of the Incorporator executing these Article of Incorporation are:

Susan M. Lupien  
1000 Ponce de Leon Blvd., Suite 306  
Coral Gables, Florida 33134

IN WITNESS WHEREOF the undersigned Subscriber has executed these Articles of Incorporation this 8 day of September, 2000

  
Susan M. Lupien

PERSONALLY KNOWN        OR PRODUCED ID         
OF ID PRODUCED 6 150-79350-846-0

STATE OF FLORIDA:

SS

COUNTY OF DADE:

Before me, personally appeared SUSAN M. LUPIEN to me well known and known to me to be the person described in and who executed the foregoing ARTICLES OF INCORPORATION of APPLE PIE PRODUCTIONS, INC. and acknowledged to and before me that she has executed said instrument for the purposes therein expressed.

WITNESS my hand and official seal, this 8 day of September, 2000

*Margarita Gonzalez*

NOTARY PUBLIC, STATE OF FLORIDA

My commission expires: \_\_\_\_\_

