

PO1000027128
TRANSMITTAL LETTER

FILED

01 MAR 12 PM 3:22

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: SHOW ONE PRODUCTIONS, INC.
(Proposed corporate name - must include suffix)

700003831327--9
-03/12/01--01123--001
*****78.75 *****78.75

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:

GUS OAXACA

Name (Printed or typed)

6420 METRO WEST BLVD # 1012

Address

ORLANDO, FL. 32861

City, State & Zip

407-295-5120

Daytime Telephone number

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

CB 3-15

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

SHOW ONE PRODUCTIONS INC.

ARTICLE II PRINCIPAL OFFICE

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

PLACE:
6420 Metro West Blvd #1012
ORLANDO FL 32861

MAILING ADDRESS
P.O. BOX 616339
ORLANDO FL 32861-6339

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

5 (FIVE)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

GUS OAXACA #1012
6420 Metro West Blvd., ORLANDO FL 32861.

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

GUS OAXACA
6420 Metro West Blvd #1012
ORLANDO FL 32861

Signature/Incorporator

Date

3/5/01

(An additional article must be added if an effective date is requested.)

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

Signature/Registered Agent

Date

3/05/01

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