

P02000126840

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

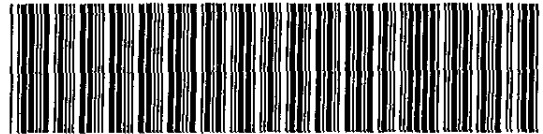
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Certificates of Status ☒

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12-3-02  
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## TRANSMITTAL LETTER

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

SUBJECT: Xtramedia Productions INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Chad Durnan  
Name (Printed or typed)

721 Lake Blvd  
Address

Weston, FL 33326  
City, State & Zip

954-609-3362  
Daytime Telephone number

**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:

Xtramedia Productions Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

721 Lake Blvd  
Weston, FL 33326

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Internet Marketing

**ARTICLE IV SHARES**

The number of shares of stock is:

3,000 shares at \$.01 par value

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s), address(es) and title(s):

Chad Durnan – President, Director  
Paul Bettini – Vice President, Secretary, Director  
Bill Moynihan – Treasurer, Director

**ARTICLE VI REGISTERED AGENT**

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

Paul Bettini  
721 Lake Blvd  
Weston, FL 33326


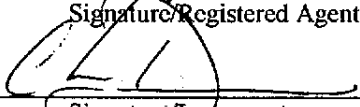
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Chad Durnan  
721 Lake Blvd  
Weston, FL 33326

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*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

11-19-02  
\_\_\_\_\_  
Date  
11/19/02  
\_\_\_\_\_  
Date

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TALLAHASSEE, FLORIDA