

PO3000084393

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## TRANSMITTAL LETTER

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

SUBJECT: SHadez of Blac Production & Entertainment 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:

Alton W. Drummond

Name (Printed or typed)

282 SW 7th

Address

Dania Fla 33004

City, State & Zip

(305) 469-7235

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)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

SHADEZ OF BLAC  
Production & ENTERTAINMENT INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

282 S.W 7 ST  
DANIA FLA 33004

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

(P) ALTON N DRUMMOND  
282 S.W 7 ST  
DANIA, FLA 33004

**ARTICLE VI REGISTERED AGENT**

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

ALTON N DRUMMOND  
282 S.W 7 ST  
DANIA, FLA 33004

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

ALTON N DRUMMOND  
282 S.W 7 ST  
DANIA, FLA 33004

\*\*\*\*\*  
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