

PO3000129215

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

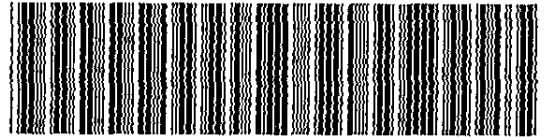
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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11/10/03--01010--002 \*\$78.75

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

03 NOV 10 PM 3:00

03 NOV 10 PM 12:26

STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

## ATTORNEYS' TITLE

Requestor's Name

1965 Capital Circle NE, Suite A

Address

Tallahassee, Fl 32308

City/St/Zip

850-222-2785

Phone #

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

- 1- ULTIMATE PERFORMERS, INC.
- 2- \_\_\_\_\_
- 3- \_\_\_\_\_
- 4- \_\_\_\_\_

☒ Walk-in

☐ Pick-up time ASAP

☒ Certified Copy

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

### NEW FILINGS

<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

### AMENDMENTS

<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

### OTHER FILINGS

<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

### REGISTRATION/QUALIFICATION

<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

## 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:

ULTIMATE PERFORMERS, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

595 W. Granada Blvd., Suite A, Ormond Beach, FL 32174

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:  
any and all business lawful in the State of Florida.

### ARTICLE IV SHARES

The number of shares of stock is:

100 shares @ \$1.00 par value

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Joseph Golinski, President - 595 W. Granada Blvd., Suite A, Ormond Beach, FL 32174

Johnny Goodrich, VP - 595 W. Granada Blvd., Suite A, Ormond Beach, FL 32174

William Gahagan, S/T - 595 W. Granada Blvd., Suite A, Ormond Beach, FL 32174

### ARTICLE VI REGISTERED AGENT

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

Robert Kit Korey, 595 W. Granada Blvd., Suite A, Ormond Beach, FL 32174

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

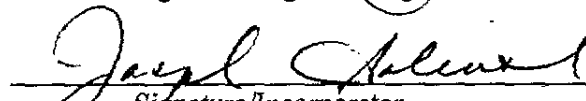
Joseph Golinski, 595 W. Granada Blvd., Suite A, Ormond Beach, FL 32174

\*\*\*\*\*

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

11/05/03  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

11/5/03  
\_\_\_\_\_  
Date

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
03 NOV 10 PM 3:00