

P03000144296

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

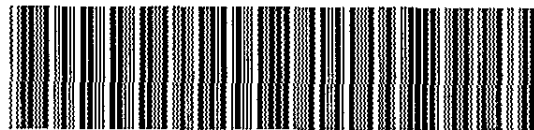
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF STATE
DIVISION OF CORPORATIONS

12-4-03

TRANSMITTAL LETTER

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

SUBJECT: CFI TELEVISION, 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: IRVING BRAUD
Name (Printed or typed)

5467 LAUREL OAK ST
Address

DELRAY BEACH FL 33484
City, State & Zip

(561) 496-4263
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
DIVISION OF CORPORATIONS
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ARTICLE I NAME

The name of the corporation shall be:

CFI TELEVISION, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5467 LAUREL OAK ST
DELRAY BEACH FL 33484

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ENTERTAINMENT - TELEVISION PRODUCTION &
DISTRIBUTION

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

IRVING BRAUD PRESIDENT / TREASURER
PETER ARCHER U. P. / SECRETARY

ARTICLE VI REGISTERED AGENT

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


PETER ARCHER
6812 OAKHILL
NORTA LAUDERDALE, FL 33068

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

IRVING BRAUD
5467 LAUREL OAK CT
DELRAY BEACH, FL 33484

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

x 

Signature/Registered Agent

11/18/03

Date

x 

Signature/Incorporator

11/18/03

Date