P0400035899

(Requestor's Name)				
(Address)				
(Add	dress)	·		
(City	//State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



000027401080

02/12/04--01053--003 **78.75

SCORETARY OF STATE TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

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: An Tend Olke Name (Printed or typed)					
6670 SW 54 LV. Address					
Miami, Fl. 33155					
786-206-1560 Daytime Telephone number					

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 17, 2004

VAN TERRELL DUKE 6670 SW 54 LANE MIAMI, FL 33155

SUBJECT: VIDEO SYSTEMS OF FLORIDA

Ref. Number: W04000006823

We have received your document for VIDEO SYSTEMS OF FLORIDA and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

You must list the Registered Agents name and address in Article VI and that person must sign accepting that designation.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Document Specialist New Filings Section

Letter Number: 004A00010871

*	In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED
	ARTICLE I NAME	
	The name of the corporation shall be:	04 FEB 25 PM 12: 46
	Video Systems of Florida DVG	SECRETARY OF STATE TALLAHASSEE, FLORIDA
	ARTICLE II PRINCIPAL OFFICE	
	The principal place of business/mailing address is:	
	6670 SW. 54 LANC.	
	ARTICLE III PURPOSE	
	The purpose for which the corporation is organized is:	
	Sale of Video Equipment	
	ARTICLE IV SHARES	
	The number of shares of stock is:	
	ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
	List name(s), address(es) and specific title(s):	,
	VAN Terrell Duke Bresiden	f
	6670 EW 54 LN	
	Miami, FL. 33153	
	ARTICLE VI REGISTERED AGENT	
	The <u>name and Florida street address</u> of the registered agent is:	
	VAN Terrell Duke	
	6070 SW 54LN.	
	Mi'AMI FL. 33165 ARTICLE VII INCORPORATOR	
	The name and address of the Incorporator is:	
	Van Terrell Duke	
	6670 SW 54 LN. Miami, FL. 33	/05
	Having been named as registered agent to accept service of process for the above stated of	
	certificates I am familiar with and accept the appointment as registered agent and agree to	act in this capacity
	he	2/2/100/
	Signature/Registered Agent	Date
		<i>j</i> ,
	VV Thomas	2/9/04
	Signature/Incorporator	/ Date