

PO4000137381

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2004 OCT -4 PM 2:43
TALLAHASSEE FLORIDA
STATE

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STATE
CORPORATIONS
TALLAHASSEE FLORIDA

10/4/04

TRANSMITTAL LETTER

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2004 OCT -4 PM 2:43

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

DEPARTMENT OF STATE
TALLAHASSEE FLORIDA

SUBJECT: CHMG FILMS 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: Tawares Clarte
Name (Printed or typed)

415 Chapel Dr. #A-207
Address

Tall, FL 32304
City, State & Zip

850-519-3974
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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CLERK OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

CMMG Films Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

415 Chapel Dr. # A-207
Tall. Fl 32304

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Film Productions

ARTICLE IV SHARES

The number of shares of stock is:

10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Tavares Clarke CEO - 415 Chapel Dr. #A-207
Daniell Kester President - same

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Tavares Clarke
415 Chapel Dr. #A-207
Tall. Fl 32304

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Tavares Clarke
415 Chapel Dr. #A-207
Tall Fl 32304

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

Tavares Clarke
Signature/Registered Agent

10-4-04
Date

Tavares Clarke
Signature/Incorporator

10-4-04
Date