

P05.0000084010

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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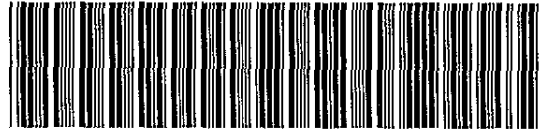
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

cg. 6-10

TRANSMITTAL LETTER

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

SUBJECT: CREATIVE Sounds & 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: CLAUDIOUS THOMPSON
Name (Printed or typed)

650 N.W. 210 St., Unit 105
Address

Miami, FL 33169
City, State & Zip

786-277-4217
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

May 26, 2005

CLAUDIOUS THOMPSON
650 NW 210 ST., UNIT 105
MIAMI, FL 33169

SUBJECT: CREATIVE SOUNDS & ENTERTAINMENT, INC.
Ref. Number: W05000026535

We have received your document for CREATIVE SOUNDS & ENTERTAINMENT, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State.

The fees for profit and nonprofit, domestic or foreign are as follows:

Filings Fees:	\$35.00
Registered Agent Designation	\$35.00
Certified Copy	\$8.75
Certificate of Status	\$8.75

The document must state the number of shares of authorized stock.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The person designated as incorporator in the document and the person signing as incorporator must be the same.

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) 245-6047.

Carolyn Lewis
Document Specialist
New Filings Section

Letter Number: 205A00038026

RECEIVED

05 JUN -9 PM 12:23

TRANSMITTAL LETTER

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

SUBJECT: Creative Sounds & 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: Claudious Thompson

Name (Printed or typed)

650 NW 210 Street - Unit 105

Address

Miami, Florida 33169

City, State & Zip

786-277-4217

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)

ARTICLE I NAME

The name of the corporation shall be:

Creative Sounds & Entertainment, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

650 NW 210 street - unit 105
Miami, FL 33169

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Party/Entertainment Services (but not limited to)

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):

Claudious Thompson - President and Secretary
650 NW 210 st., unit 105, Miami Gardens, FL 33169

Austin Hodge- Vice President and Treasurer
5620 SW 27 st., Hollywood, FL 33023

ARTICLE VI REGISTERED AGENT

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


Claudious Thompson
650 NW 210 st., unit 105, Miami Gardens, FL 33169

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Claudious Thompson
650 NW 210 st., unit 105, Miami Gardens, FL 33169

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

6/2/05

Date



Signature/Incorporator

6/2/05

Date

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05 JUN -9 PM 2:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA