

P05000084731

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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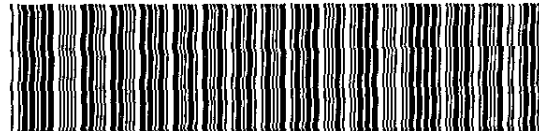
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/13/05--01007--013 **78.75

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05 JUN 13 PM 3:34
SEALARY OF STATE
TALLAHASSEE, FLORIDA

6/13/05
BLK

TRANSMITTAL LETTER

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

SUBJECT: AFISHIONADO RADIO, 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: Dennis "Wade" Osborne
Name (Printed or typed)

P.O. Box 18492
Address

Tampa, FL 33679
City, State & Zip

813-286-3474
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:

Afashionado Radio, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Tampa: P.O. Box 18492
Tampa, FL 33679

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Radio Program

ARTICLE IV SHARES

The number of shares of stock is:

100 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Dennis "Wade" Osborne
204 South Manhattan Ave.
Tampa, FL 33609
President

ARTICLE VI REGISTERED AGENT

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

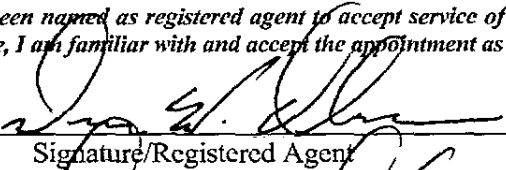
Dennis "Wade" Osborne
204 South Manhattan Ave.
Tampa, FL 33609

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

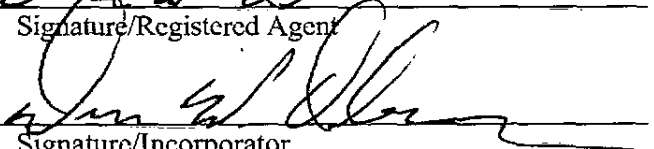
Dennis "Wade" Osborne
204 South Manhattan Ave.
Tampa, FL 33609

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

6-8-05
Date



Signature/Incorporator

6-8-05
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA