

PO6000049707

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

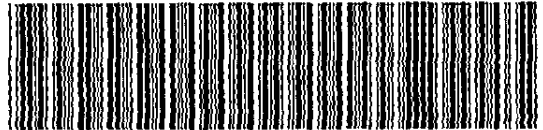
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
06 APR -6 AM 8:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. WHITE APR -7 2006

COVER LETTER

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

SUBJECT: Cobra 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: Darwin Urane

Name (Printed or typed)

PO Box 11021

Address

Jacksonville, Florida 32239

City, State & Zip

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:

Cobra Entertainment, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

PO Box 11021
Jacksonville, Florida 32239

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

all legal business

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):

Darwin Urane
PO Box 11021
Jacksonville, Florida 32239

ARTICLE VI REGISTERED AGENT

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

Darwin Urane
1436 W. State St.
Jacksonville, Florida 32209

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Darwin Urane
PO Box 11021
Jacksonville, Florida 32239

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

Darwin Urane
Signature/Registered Agent

Darwin Urane
Signature/Incorporator

FILED

06 APR -6 AM 8:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4-4-06
Date

4-4-06
Date