

PO6000058524

(Requestor's Name)

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(Address)

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PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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04/13/06--01024--004 **35.00

03/24/06--01026--002 **43.75

03/24/06--01026--003 **8.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 APR 25 PM 3:27

w06-13514
w06-17704

(M) 1/10/06

COVER LETTER

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

SUBJECT: LaFABION 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: TORI D. ELLISON
Name (Printed or typed)

P.O. Box 2372
Address

Belle Glade, FL 33430
City, State & Zip

(561) 993-0628
Daytime Telephone number

RECEIVED
06 APR 21 3 44 PM '84

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 31, 2006

TORI ELLISON
P.O. BOX 2372
BELLE GLADE, FL 33430

SUBJECT: LAFABION ENTERTAINMENT INC.
Ref. Number: W06000015514

We have received your document for LAFABION ENTERTAINMENT INC. and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$35.00.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6921.

Maryanne Dickey
Document Specialist Supervisor
New Filing Section

Letter Number: 306A00022077



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 13, 2006

TORI D. ELLISON
P.O. BOX 2372
BELLE GLADE, FL 33430

SUBJECT: LAFABION ENTERTAINMENT INC.
Ref. Number: W06000017704

We have received your document for LAFABION ENTERTAINMENT INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

Please list the street address of each officer/director.

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 registered agent must sign accepting the 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) 245-6921.

Maryanne Dickey
Document Specialist Supervisor
New Filing Section

Letter Number: 506A00025250

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:

LaFABION ENTERTAINMENT INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

**P.O. Box 2372
Belle Glade, FL. 33430**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Promotions, Music Management, Production

ARTICLE IV SHARES

The number of shares of stock is:

(1) Share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

**Tori D. Ellison - CEO & Founder (President)
1500 N.W. Ave. G
Belle Glade, Fl. 33430**

ARTICLE VI REGISTERED AGENT

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

**Tori D. Ellison
1500 N.W. Ave G.
Belle Glade, FL. 33430**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**TORI D. ELLISON
1500 N.W. Ave. G - P.O. Box 2372
Belle Glade, FL. 33430**

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

Tori D. Ellison

Signature/Registered Agent

4-20-06

Date

Tori D. Ellison

Signature/Incorporator

4-6-06

Date

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DIVISION OF CORPORATIONS
06 APR 25 PM 3:27