

P07000019455

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

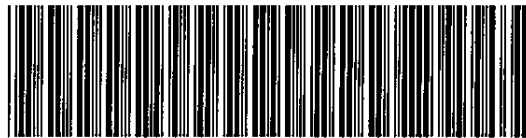
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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02/12/07--01041--025 **87.50

FILED
2007 FEB 12 PM 2:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: TrueVision Productions, 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: Mario A. Salvi

Name (Printed or typed)

1136 SW 12 Street

Address

Boca Raton FL 33486

City, State & Zip

561-237-5492

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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

TrueVision Productions, INc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1136 SW 12 Street Boca Raton FL 33486

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Profit

Self Improvement and Self Empowerment Materials, Seminars and Workshops

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):

Mario A. Salvi - President

Shelly D. Salvi - Vice President

Mario A. Salvi - Director

ARTICLE VI REGISTERED AGENT

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

Mario A. Salvi

1136 SW 12 Street Boca Raton FL 33486

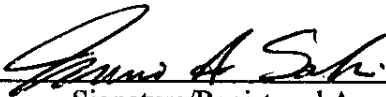
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Mario A. Salvi

1136 SW 12 Street Boca Raton FL 33486

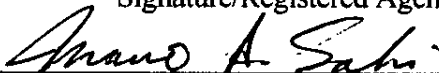
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

2-6-07

Date



Signature/Incorporator

2-6-07

Date

Mario A. Salvi