

008000010422

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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☐

MAIL

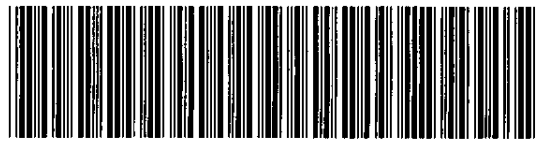
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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08 JAN 28 AM 11:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1/29/08

## COVER LETTER

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

SUBJECT: Silentwing Production\$ 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      ☒ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: Silentwing Production\$, Inc.

Name (Printed or typed)

%Chick & Karo CPA's PA 115 SW 89th Way

Address

Coral Springs, FL 33071

City, State & Zip

954-753-7957

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:

Silentwing Productions, Inc.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

1107 Harrison Street  
Hollywood, FL 33019

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Motion pictures production

### **ARTICLE IV SHARES**

The number of shares of stock is:

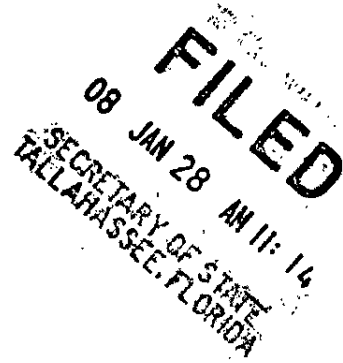
1,000

### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Melanie M. Grefe PD  
1107 Harrison Street  
Hollywood, FL 33019

William Grefe SD  
14390 Mustang Trail  
Ft. Lauderdale, FL 33330



**ARTICLE VI REGISTERED AGENT**

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

Melanie M. Grefe  
1107 Harrison Street  
Hollywood, FL 33019

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

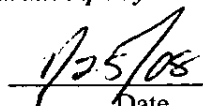
Melanie M. Grefe  
1107 Harrison Street  
Hollywood, FL 33019

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*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

  
\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature/Incorporator

\_\_\_\_\_  
Date