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(Re	equestor's Name))		
(Ad	ldress)			
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(Cit	ty/State/Zip/Phon	ne #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				
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SECRETARY OF STATE

20-12

COVER LETTER

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

SUBJECT:	Espo Productions, Inc.			
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	rinal and one (1) copy of the ar	ticles of incorporation and	a check for:	
☑ \$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM:		(Tony) Esposito		
	3036 Lake Vista Dr. Address			
		ater, Fl. 33759 V, State & Zip		
		7-797-4007		

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 NÂME

The name of the corporation shall be:

Espo Productions, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 3036 Lake Vista Dr. Clearwater . Fl. 33759

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Audio and Video Productions 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):

Tony Esposito 3036 Lake Vista Dr. Clearwater, Fl. 33759 President



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