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# **COVER LETTER**

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

SUBJECT:	One Way District Entertainment Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INC</u> I	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	l a check for:
□ \$70.00 Filing Fee	☑ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM:	Joseph Roman Name (Printed or typed)  5808 Auvers Blvd Apt. 205 Address		
	Orlando, FL 32807 City, State & Zip		
		09-9655 elephone number	

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

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### 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:

One Way District Entertainment Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

5808 Auvers Blvd Apt. 205 Orlando, FL 32807

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

One Way District Entertainment will host public and private events for clients based in Florida. Each event will be composed differently depending on client's interest. Our main focus is to provide a service of great quality entertainment for all cliental.

## ARTICLE IV SHARES

The number of shares of stock is: 5,000,000 shares

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

President: Joseph Roman; 5808 Auvers Blvd Apt. 205 Orlando, FL 32807 Vice President: James Patterson; 7853 Shoal Dr. Orlando, FL 32817 Treasurer: Janette Vazquez; 3208 Holridge St. Chesterfield, VA

### ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: Joseph Roman; 5808 Auvers Blvd Apt. 205 Orlando, FL 32807

### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: James Patterson; 7853 Shoal Dr. Orlando, FL 32817

*************	************
Having been named as registered agent to accept service of process for the certificate, I am familiar with and accept the appointment as registered agent	above stated corporation at the place designated in this and agree to act in this capacity
	08/19/68
Signature/Registered Agent	Date Date
Signature/Incorporator	Date