

PO8000100568

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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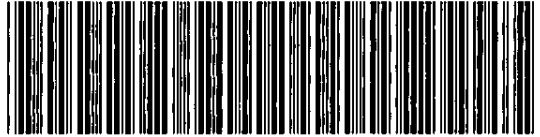
(Business Entity Name)

(Document Number)

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

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TALLAHASSEE, FLORIDA

RA

## COVER LETTER

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

SUBJECT: KIDS ON STAGE 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: JOSEPH R PENNELL

Name (Printed or typed)

4054 LOUIS AV

Address

HOLIDAY FL 34691

City, State & Zip

16314334938

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:

KIDS ON STAGE INC.

**ARTICLE II PRINCIPAL OFFICE**

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

4054 LOUIS AV  
HOLIDAY FL 34691

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Entertainment

**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):

Joseph R Pennell Pres/Sec  
2700 Cove Cay Dr  
Clearwater FL 33760  
Cousance Rodolfo V Pres/Treas  
694 Cypress St, New Milford N.J. 07646

**ARTICLE VI REGISTERED AGENT**

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

JOSEPH R PENNELL  
2700 COVE CAY DR/ SUITE 6D  
CLEARWATER FL 33760

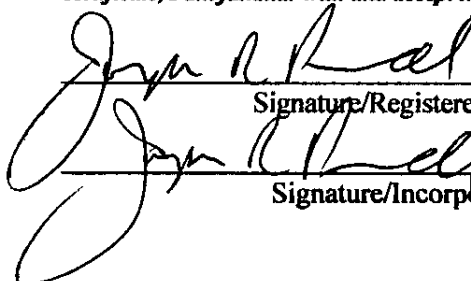
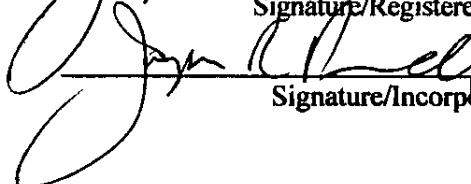
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

JOSEPH R PENNELL  
4054 LOUIS AV  
HOLIDAY FL 34691

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

11/4/08  
\_\_\_\_\_  
Date  
11/4/08  
\_\_\_\_\_  
Date

FILED  
08 NOV 10 AM 3:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA