

PD 9480075142

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(City/State/Zip/Phone #)

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2009 SEP -8 P 1:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

9-9-09  
68-6-6  
28

## COVER LETTER

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

SUBJECT: \_\_\_\_\_  
(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: FOUAD OVEDIA  
Name (Printed or typed)

7008 LOUH ISLE DR.  
Address

MIAMI LAKES FL 33014  
City, State & Zip

305-362-4310  
Daytime Telephone number

FOUADOVEDIA(a)YAHOO.COM  
E-mail address: (to be used for future annual report notification)

**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:

F.O. PRODUCERS CORP.

**ARTICLE II PRINCIPAL OFFICE**

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

7008 LOCH ISLE DR.  
MIAMI LAKES FL 33014

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

PRODUCTION CORP. SHOWS.

**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):

FOUAD OVEDIA (PRES)  
7008 LOCH ISLE DR MIAMI LAKES FL 33014

**ARTICLE VI REGISTERED AGENT**

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

FOUAD OVEDIA  
7008 LOCH ISLE DR MIAMI LAKES FL 33014

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

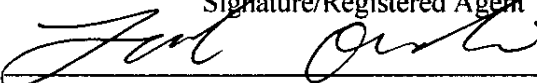
FOUAD OVEDIA  
7008 LOCH ISLE DR MIAMI LAKES FL 33014

\*\*\*\*\*  
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

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TALLAHASSEE, FLORIDA