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# **COVER LETTER**

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

SUBJECT: AMG Fill	ms, Inc.	THE WANT MUST IN CO.	
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u> )
Enclosed are an original	inal and one (1) copy of the art	icles of incorporation and	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
FROM: Tim	othy L Warren		
	Nam	e (Printed or typed)	
370	0 NW 124th AVE UNIT 121		
		Address	
COF	RAL SPRINGS, FL 33065 City,	, State & Zip	
574-	329-3966		
	Daytime 7	Telephone number	
TIMA	BANC EURO COM		

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

E-mail address: (to be used for future annual report notification)

# 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:

AMG FILMS, INC.

# ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is: 3700 NW 124TH AVE UNIT 121 CORAL SPRINGS, FL 33065

# ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: PURPOSE IS TO ENGAGE IN ANY LAWFUL ACTIVITY

# ARTICLE IV SHARES

The number of shares of stock is: 1000

# INITIAL OFFICERS AND/OR DIRECTORS

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

3700 NW 124TH CORAL SPRINGS, TIMOTHY L **UNIT 121** 

FL 33065

WARREN 3700 NW 124TH CORAL SPRINGS,

JOHAN STRUM UNIT 121

DIRECTOR FL 33065

DIRECTOR

# ARTICLE VI REGISTERED AGENT

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

3700 NW 124TH UNIT 121

CORAL SPRINGS, FL 33065

Timothy L Warren

# ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

TIMOTHY L WARREN

3700 NW 124TH UNIT 121

CORAL SPRINGS, FL 33065

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

ture/Registered)Agent

fature/Incorporator

Date