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## **COVER LETTER**

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

SUBJECT: <u>G</u> C	proposed corpo	RS Production	n, INC
	(PROPOSED CORPO	RATE NAME – <u>MUST INCLI</u>	<u>UDĖ SUFFIX</u> )
Enclosed are an orig	inal and one (1) copy of the a	articles of incorporation and	a check for:
\$70.00	\$78.75	\$78.75	\$87.50
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy
			& Certificate of Status
		ADDITIONAL COPY REQUIRED	

FROM: Zayulyus Dempsey Name (Printed or Typed)
Name (Prlinted or Myped)
500 S.W. 33rd AVE APT 95 A
Address •
Ocala Florida 34475 City, State & Zip
City, State & Zip
(352) 857-1814
Daytime Telephone number
F-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:		
Go Hard soldiers Production, Inc		
ARTICLE II PRINCIPAL OFFICE  The principal street address and mailing address, if different is:  500 s.w. 33 AVE APT 95A  OCALA FLOCICLA 34475  ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  ANY and all lawful business	10 AUG 17	SECRET DIVISION
ARTICLE IV SHARES The number of shares of stock is:	17 AM 10: 00	ARY OF ST
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):  Zayulyus Dempsey  Soo s.w. 33 <sup>rd</sup> AVE APT 95 # (NO other of licens)  Ocala Florida 34475  ARTICLE VI REGISTERED AGENT	00	ATIONS
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:  Zayvyus Dempsey  500 sai33 AVE APT 95 A  Ocala Florida 34475 <u>ARTICLE VII INCORPORATOR</u> The <u>name and address</u> of the Incorporator is:		
Zayviyus Dempsey 500 s.w. 33rd AVE Aft 95A O Cala Florida 34475 ***********************************	*****	****
Having been named as registered agent to accept service of process for the above stated coplace designated in this certificate, I am familiar with and accept the appointment as registagree to act in this capacity	-	
3 ayrıyın Dempley 8/02/ Signature/Registered Agent/ Date	20/0	

08/02/20/0 Date