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- COVER LETTER-

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

SUBJECT: Film S	Services Representatives, Inc.
	(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

ores or meorporation and	a check for.
□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
	Filing Fee

1: John M. Lee IV	
	Name (Printed or typed)
592 Rochester Street	
Jaz Rochester Street	Address
	71441003
Ovieda Florida 20765	
Oviedo, Florida 32765	City, State & Zip
	Only, State & Dip
407-810-5082	
	Daytime Telephone number
407-010-0002	Daytime Telephone number
jmlee34@att.net	

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:

Film Services Representatives, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 592 Rochester Street

Oviedo, FL. 32765

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
To transact all legal business for which it is authorized.

MANUFACTURES PEDRESENTATIVE

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

John M. Lee IV

ARTICLE VI REGISTERED AGENT

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

John M. Lee IV

592 Rochester Street

Oviedo, FL, 32765

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

John M. Lee IV

592 Rochester Street

Oviedo, FL. 32765

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

8-7-2010

Date

8-7-2010

Date

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