9100022461

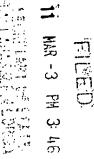
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



300196258443

03/03/11--01012--009 **78.75



Ps 3/8/11

COVER LETTER

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

SUBJECT: NGM Entertanment, In	IC.
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the art	icles of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED
FROM: NGM Entertainment, Inc Name	e (Printed or typed)
1377 Blue Spruce CT.	
•	Address
Wnter Springs, FL. 327	08 State & Zip
407-257-1373	
Daytime T	elephone number
DRUCEM WALLACE	d for future annual report notification)
L-man address. Ho be use	u ioi iaigie allillai leduli lioillicailoll)

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

Bruce M. Wallace 1377 Blue Spruce Court Winter Springs, Florida 32708 email / brucemwallace2000@yahoo.com cell phone / 407-257-1373

Monday February 28, 2011

To Whom It May Concern:

Thank you for processing my request for incorporation. In the city of Winter Springs, I also need to file for a permit. If it is at all possible, could the enclosed information be forwarded to the City of Winter Springs Permit Office by email at the address provided on the enclosed business card? The representative from the city was kind and helpful and told me that you all might be able to forward the final paperwork to them directly by email and thereby save a couple of weeks in the process of completing my new corporation. Only after that step in the process is compete am I able to then go to my bank and open the appropriate account to begin paying my employed persons for their time and work.

If necessary, you may reach me by email or by cell phone listed above. Otherwise, I can assume all other communication may be conducted with the email address for the City of Winter Springs Permit Office that is on the card provided.

Thank you so much for whatever consideration you might be able to afford concerning this matter.

Bruce M. Wallace

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I The name of the corp	VAME NGM Entertainment, loration shall be:	nc.	
13	PRINCIPAL OFFICE Principal street address 77 Blue Spruce Ct. nter Springs, FL 32708	-	ress, if different is:
	URPOSE ch the corporation is organized is: s forms of entertainment to variou	us groups	
The number of share	SHARES s of stock is:1000 INITIAL OFFICERS AND/OR DIRECT	n pe	
	eBruce M Wallace President 1377 Blue Spruce Ct. Winter Springs, FL 32708	Name and Title: Lisa C V Address: 1377 Blue	Vallace Secretary Je Spruce Ct. Sp;rings, FL 32708I
Name and Titl Address:	e:	Address:	
Name and Titl Address:	e:	Name and Title:Address:	
	REGISTERED AGENT da street address (P.O. Box NOT acceptable Edward F. Starr 17117 Gulf Blvd, #328		FICED R
	N. Redington Beach, FI 33708 NCORPORATOR ess of the Incorporator is:		5.7 6
Address: Having been named this certificate. I am	1377 Blue Spruce CT Winter Springs, Fl. 32708 I as registered agent to accept service of profamiliar with and accept the appointment as	ocess for the above stated corpora	ation at the place designated in in this capacity
	Required Signature/Registered Agent		3/28/11 Date
I submit this docum document to the Dep	nent and affirm that the facts stated herein partment of State constitutes a third degree for Required Signature/Incorporator	are true. I am aware that the factiony as provided for in s.817.155.	ulse information submitted in a .F.S. 2/28//j Date

IRS DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE CINCINNATI OH 45999-0023

002021.832485.0007.001 1 MB 0.382 852

Date of this notice: 01-31-2011

Employer Identification Number:

27-4663663 Form: SS-4

Number of this notice: CP 575 A

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB OF THIS NOTICE.



NGM ENTERTAINMENT INC 1377 BLUE SPRUCE CT WINTER SPGS FL 32708

002021

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 27-4663663. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 1120

03/15/2012

If you have questions about the form(s) or the due dates(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, Accounting Periods and Methods.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, Entity Classification Election. See Form 8832 and its instructions for additional information.