P11000024051

(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:				





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STONE OF STATE
STONE ANY SSEE, FLORID

To 03/11/11

COVER LETTER

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

SUBJECT: Black Door Films Inc.	
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the arti	cles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED
FROM: James P. Venable	
Name .	(Printed or typed)
1516 Wagner Circle	Address
	Address
Lake Clarke Shores, FL	33406
City,	State & Zip
561-267-8989	
Daytime 16	elephone number
james@blackdoorfilms.c	om 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 The name of the cor	NAME Black Door Films Inc.		
	PRINCIPAL OFFICE Principal <u>street</u> address 516 Wagner Circle		ing address, if different is:
<u>_</u>	ake Clarke Shores, FL 33406		
ARTICLE III I The purpose for wh Said corporati	PURPOSE ich the corporation is organized is: on is organized exclusively for tv, fil	m and music editi	ng and production.
•			
ARTICLE IV The number of share	s of stock is: 100	ng.	
	INITIAL OFFICERS AND/OR DIRECTOR E:James P. Venable, President		
Address:	1516 Wagner Circle	Name and Title	
	1516 Wagner Circle Lake Clarke Shores, FL 33406		
NI. ETT'S			
Name and 110 Address:	e:	Name and Title: Address:	
	e;	Name and Title:	
Address:			
			
ADMICE DE M			
	REGISTERED AGENT da street address (P.O. Box NOT acceptable) o	Etha madatanud unant iau	_,
Name:	James P. Venable		Zo =
Address:	1516 Wagner Circle	_	
	Lake Clarke Shores, FL 33406	_ _	
		_	STE L ETTER
	NCORPORATOR		25 m
Name:	ess of the Incorporator is:		
Address:	James P Venable		Land Co. Time Landson Co.
rach ess.	1516 Wagner Circle Lake Clarke Shores, FL 33406		
Having been named this certificate, I am	as registered agent to accept service of proces familiar with and accept the appointment as reg	ss for the above stated cristered agent and agree	orporation at the place designated in to act in this capacity
Van	D1/1 /1		-11
- lan	Required Signature/Registered Agent		-3/4/11
	reduiter Signature/Registeren Agent		/ Date
	nent and affirm that the facts stated herein are		
uocument 10 the Dep	partment of State constitutes a third degree felon	ry as proviaed for in s.8 t	7.133, F.S.
	mes (Chahl	•	o bet la
. 	Required Signature/Incorporator		
•	J 2-B		/ 2400