P11000047503

	(Requestor's Name)
	(Address)
	(Addiess)
	(Address)
	(City/State/Zip/Phone #)
PICK-L	JP WAIT MAIL
	(Business Entity Name)
	,
	(Document Number)
Certified Copies:	Certificates of Status
Special Instruction	ns to Filing Officer:
	*
	Office Use Only



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05/19/11--01016--018 **78.75

TO ACKNOWLEDGE TO ACKNOWLEDGE SUFFICIENCY OF FILING DEPARTMENT OF STATE OF STATE OF CORPORATIONS
2011 NAY 19 AM 11: 28

11 MAY 19 AM 8: 2L SECRETAIN OF STATE MAIN AHASSEE EL COLON

APPINATED,

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LAZARUS

CR2E031(7/97)

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

PHAP-11, 1 E 33103 (303)	, 552 5575
	Office Use Only
RPORATION NAME(S) & DO	CUMENT NUMBER(S), (if known):
REMY GO (Corporation Name)	YZ PRODUCTIONS, IN
	•
(Corporation Name)	(Document #)
(Corporation Name)	(Document #)
(Corporation Name)	(Document #)
Walk in Pick up time Mail out Will wait	Photocopy
NEW FILINGS	<u>AMENDMENTS</u>
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other

ARTICLES OF INCORPORATION

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



ARTICLE I The name of the cor	NAME REMY BOYZ PROporation shall be:	ODUCTIONS, INC	11 MAY 19 AM 8: 24
ARTICLE II	PRINCIPAL OFFICE		SECRETARY OF STATE
	Principal street address	Mailing :	additatiin dia santa FLORIDA
3	204 NW 17TH AVE	3204 NORTH	WEST 17TH AVE CONIDA
M	IIAMI, FLORIDA 33142	<u>MIAMI, FLOR</u> I	DA 33142
_			
ARTICLE III	DIDDOGE		
	hich the corporation is organized is:		
	siness transaction		
ARTICLE IV	SHARES		
The number of shar			
	INITIAL OFFICERS AND/OR DIR		
	ile:ROBERTO GERONIMO(Pre		
Address:	3900 NW 173 AVE		
	MIAMI GARDEN, FLORIDA	33055_	
Name and Ti	tle: ADRIANA GERONIMO(Vice	Pre Name and Title:	
Address:	3900 NW 173 AVE	Address:	
	MIAMI GARDEN, FLORIDA	33055	
Mama and Ti	tle:	Name and Title:	
Address:		Address:	
Addiess.			
	REGISTERED AGENT rida street address (P.O. Box NOT acce	ntable) of the registered agent is:	
Name:	ADRIANA GERONIMO		
Address:	3900 NW 173 AVE		
	MIAMLGARDEN, ELORIDA	A 33055	
	•		
	<u>INCORPORATOR</u>		
	ress of the Incorporator is:		
Name:	ROBERTO GERONIMO	.	
Address:	3900 NW 173 AVE MIAMI GARDEN, FLORIDA	A 22055	
	WIAWI GARDEN, FLORIDA	<u> </u>	
Having been name this certificate, I an	ed as registered agent to accept service of a familiar with and accept the appointment	of process for the above stated corp ent as registered agent and agree to	poration at the place designated in act in this capacity
	Lalant		5-11-11
	Required Signature/Registered A	gent	Date
Facebook dile d			a falsa information submitted in a
document to the D	ment and affirm that the facts stated he epartment of State constitutes a third_deg	erein are irue. I am aware inal in ree felony as provided for in s 917.	e juise injormuuon suomuueu in a 155. F.S
aveament to the De	parament of State Constitutes a third deg	te jetony as provincu jor in 3.617.	
	16 - 7		5-16-11
	Required Signature/Incorporat	lor	Date