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(Requestor's Name)		
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PICK-UP	WAIT MAIL	
(Business E	Entity Name)	
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Certified Copies C	ertificates of Status	
Special Instructions to Filing Officer:		

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SECRETARY OF STATE
SECRETARY OF STATE

MRD 8/12

COVER LETTER

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

92 SUBJECT: Ent. Inc.	
	RATE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the a	rticles of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate o Status ADDITIONAL COPY REQUIRED
FROм: Romar L. Carter	
Nar	ne (Printed or typed)
3622 N. 53rd St.	Address
Tampa, FL 33619	y, State & Zip
813-622-6374 Daytime	Telephone number
CarterRomar@yahoo.c E-mail address: (to be us	om sed 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. (Profi	it)
ARTICLE I N	Ent. Inc.		
The name of the corpo	oration shall be:		
ARTICLE II P	RINCIPAL OFFICE		
	Principal street address	Mailing ac	ldress, if different is:
		<u></u>	
	22 N. 53rd St		
(ar	mpa, FL 33619		
ARTICLE III P	URPOSE		
The purpose for which	ch the corporation is organized is:		
Any Lawful Business pu	urpopse.		50 3 1
			PA 6
			55 -
			62 <u> </u>
	HARES		High E
The number of shares	of stock is: IUUU		7% 2
ARTICLE V II	NITIAL OFFICERS AND/OR DIRECTOR	s	吳 要
	:Romar L. Carter President	Name and Title:	
Address:	3622 N. 53rd St,		
	Tampa, FL 33619		
			•
Name and Title	: <u> </u>		
Address:		_ Address:	.
			·
			
Name and Title	:	Name and Title:	
Address:		_ Address:	
			
	EGISTERED AGENT		
· · · · · · · · · · · · · · · · · · ·	la street address (P.O. Box NOT acceptable) of		
Name:	Romar L. Carter	-	
Address:	3622 N. 53rd St. Tampa, Fl. 33619	_	
	tampa, Fr. Sab 19.	_	
	NCORPORATOR		
	ss of the Incorporator is:		
Name: Address:	Romar L. Carter	-	
Address,	3622 N. 53rd St Tampa, FL 33619	-	
	•	-	
	as registered agent to accept service of process		
this certificate, I am f	familiar with and accept the appointment as reg	istered agent and agree to a	- · · · · · · · · · · · · · · · · · · ·
Long	1 (2)		1-6-2011
10000	Required Signature/Registered Agent		8-6-7011 Date
	Required Signature/Registered Agent		Date
	ent and affirm that the facts stated herein are		
	artment of State constitutes a third degree felony	v as provided for in s.817.15	
Ala an	Mod Control Required Signature/Incorporator		4-1-704
	Voy Court		8-6-2011
	Required Signature/Incorporator		Date

Phonett: 813-422-6374