PIWO99457

(Red	questor's Name)	
(Add	dress)	
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PICK-UP	WAIT	MAIL
(Bus	siness Entity Nai	me)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

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11/04/11--01007--009 **78.75

DIVISION OF CORPORATION



RECEIVED 11 NOV 17 AM 10: 59

FLORIDA DEPARTMENT OF STATE ISLEN OF BORFONATIONS

November 7, 2011

CHRISTOPHER GONSALVES 1600 S FEDERAL HWY SUITE 941 POMPANO BEACH, FL 33362

SUBJECT: DEJA VU ENTERTAINMENT INC.

Ref. Number: W11000056652

We have received your document for DEJA VU ENTERTAINMENT INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6901.

Pamela Smith Regulatory Specialist II

Letter Number: 511A00025215

COVER LETTER

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

SUBJECT: DeJa Vu Entertainmen		
(PROPOSED CORPORA	TE NAME – <u>MUST INC</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the arti	icles of incorporation ar	d a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL C	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED
FROM: Chris Gonsalves	e (Printed or typed)	
1600 S Federal Hwy. St	uite 941 Address	
Pompano Beach, FL 33	362 State & Zip	
954 829-4433 Daytime T	elephone number	
chrisg@dejavu-inc.org E-mail address: (to be use	d 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	NAME DeJa Vu Entertainment	Productions Inc.	SECRETARY OF S DIVISION OF CORPOR
ARTICLE II	PRINCIPAL OFFICE		11 NOV 17 PM
111111111111111111111111111111111111111	Principal street address	Mailine addres	ss, if different is:
	1600 S. Federal Hwy	Trusting address	a, it universal is.
	Suite 941	SAME	
	Pompano Beach, FL. 33362		
RTICLE III	DITDEACE		
he purpose for	which the corporation is organized is: Lawful Business		
ary arra arr			
IRTICLE IV	SHARES ares of stock is:1 000 000		
		24	
Nome and 1	INITIAL OFFICERS AND/OR DIRECTOR		
Name and ! Address:	Title: Kim Gonsalves / President 2501 NW 41 Ave		
Address:	Suite 311	Address:	
	Lauderhill FL 33313		
	Laudemiii, FL 33313		
Name and I	Fitle: Chris Gonsalves / Vice President		
Address:	2501 NW 41 Ave		
	Suite 311		
	Lauderhill, FL. 33313		
Name and T	Fitle: Aina Pace / Director	Name and Title:	
Address:	5921 NW 176st		
radics.	Suite 2		
	Miami Lakes, FL 33015		
DTICLE III	·		
	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of	Etha registered agent is:	
Name:	Kim Gonsalves	the registered agent is.	
Address:	2501 NW 41 Ave Suite 311	-	
remated.	Lauderhill FL 33313	_	
		_	
RTICLE VII	INCORPORATOR		
	Idress of the Incorporator is:		
Name:	Chris Gonsalves		
Address:	2501 NW 41 Ave Suite 311	_	
	Lauderhill, FL. 33313	_	
is certificate, I a	ned as registered agent to accept service of proces am familiar with and accept the appointment as reg	istered agent and agree to act in	this capacity
Kin	Required Signature/Registered Agent		Nov./13/2011
	Required Signature/Registered Agent		Date
	ument and affirm that the facts stated herein are Department of State constitutes a third degree felon		
		-	Nov./13/2011
	Required Signature/Incorporator		Date