P11000109451

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	<u> </u>
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
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Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

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赞DEC 29 PM 12: 11

SECRETARY OF STATE TALLAHASSEE, FLORIDA

December 14, 2011

NAEL YACOUB 7025 COUNTY ROAD 46A SUITE 1021 LAKE MARY, FL 32746

SUBJECT: FEATURE PRESENTATIONS, INC.

Ref. Number: W11000062352

We have received your document for FEATURE PRESENTATIONS, 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):

Please complete Article(s) I -- (Name of the Corporation).

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

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 the corrected original and one copy of 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) 245-6949.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 911A00027867

COVER LETTER

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

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:
\$78.75 Filing Fee & Certificate of Status \$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM: Nael Yacoub Name (Printed or typed)
7025 County Road 46 A Suite 1021
Lake Mary, fc 32746 City, State & Zip
University Head States Telephone number Daytime Telephone number
Mael @ crownaudio. net E-mail address: (to be used 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 The name of the corporation shall be: Feature Presenta	tions Inc.
Principal street address 7025 Cantly Ruad 44 4	Mailing address, if different is:
Lake mary, fl 32744	Lake mary fe 32795
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
Custom Theater in	
* Effective Date: January 1, 2017	_
The number of shares of stock is: \(\mathcal{O}\mathcal{O}\)	
Name and Title: NGE Vacous V. Mendent Name and Address: QZ Arbornoor PL Address: Lake Mary & 32746	d Title:
Name and Title: Wall Yacoub 1841dent Name and Address: San ford, fc 32771	d Title:
Name and Title: T.IM Levey Director Name and Address: Name and T.IM Levey Director Name and Nam	1 Title:
ARTICLE VI REGISTERED AGENT	9.
The name and Florida street address (P.O. Box NOT acceptable) of the registers Name: Name: Nacy Yacoub Address: 7025 CR 46 A Suite 1021 Laxe Mary, fx 32746	TOPEC TOPEC
ARTICLE VII INCORPORATOR	6
The name and address of the Incorporator is: Name: Name: Name: 1025 CK 46 A Suite 1021 Lake Mary & 32746	PH + 25
Having been named as registered agent to accept service of process for the about this certificate. I am familier with and accept the appointment as registered agent	ove stated corporation at the place designated in
Required Signature/Registered Agent	12 9 11 Date
I submit this document and affirm that the facts stated herein are true. I am document to the Department of State constitutes a third degree felony as provided	
	12/4/11
Required Signature/Incorporator	'Date '