

P120000092614

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

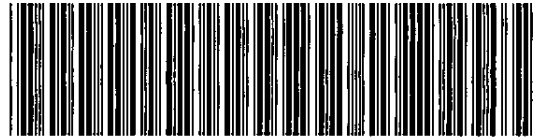
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12 NOV -5 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MD 11/6

COVER LETTER

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

SUBJECT: Cachim Enterprises Production and Media Group, Inc.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 Filing Fee
☐ \$78.75 Filing Fee & Certificate of Status

☐ \$78.75 Filing Fee & Certified Copy
☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: Julie Cachimbo
Name (Printed or typed)

8093 NW 71st Court
Address

Tamarac, FL 33321
City, State & Zip

954-919-5678
Daytime Telephone number

juliec@cachim.com
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

Cachim Enterprises Production and Media Group, Inc
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
8093 NW 71st Court
Tamarac, FL 33321

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Provide video production and media services

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Julie Cachimbo, SVP
Address: 8093 NW 71 Court
Tamarac, FL 33321

Name and Title: Hector Cachimbo
Address: 8093 NW 71 Court
Tamarac, FL 33321

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Julie Cachimbo
Address: 8093 NW 71 Court
Tamarac, FL 33321

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Julie Cachimbo
Address: 8093 NW 71 Court
Tamarac, FL 33321

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Julie Cachimbo
Required Signature/Registered Agent

10/31/2012
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Julie Cachimbo
Required Signature/Incorporator

10/31/2012
Date

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