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DIVISION OF CORPORATIONS
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COVER LETTER

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

SUBJECT: Elucid Dream Productions, Inc.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed is 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

ADDITIONAL COPY REQUIRED

FROM: David L. Ferguson, Esquire

Name (Printed or typed)

10 Vining Court

Address

Ormond Beach, FL 32176

City, State & Zip

386-677-0822

Daytime Telephone number

dferguson@ormondlawfirm.com

E-mail address: (to be used for future annual report notification)

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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)

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ARTICLE I NAME

The name of the corporation shall be: Elucid Dream Productions, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address
226 North Nova Road, Suite 175
Ormond Beach, FL 32174

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

All legal purposes available under Florida law.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Timothy P. Harris, President
Address: 226 N. Nova Road, Suite 175
Ormond Beach, FL 32174

Name and Title: _____
Address: _____

Name and Title: Melissa Williams, Secretary/Treasurer
Address: 226 N. Nova Road, Suite 175
Ormond Beach, FL 32174

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: Melissa Williams
Address: 226 N. Nova Road, Suite 175
Ormond Beach, FL 32174

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Timothy P. Harris
Address: 226 N. Nova Road, Suite 175
Ormond Beach, FL 32174

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



Required Signature/Registered Agent

11-13-2012

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.



Required Signature/Incorporator

11-13-2012

Date