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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch DEC 17 2012

## COVER LETTER

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

SUBJECT: Amateur Productions, 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: John A. Turner, Esq.

Name (Printed or typed)

515 N. Flagler Drive, Suite 600

Address

West Palm Beach, FL 33401

City, State & Zip

561-833-9800

Daytime Telephone number

jaturner@arnstein.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**

The name of the corporation shall be: **Amateur Productions, Inc.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
c/o Spielman Koenigsberg & Parker, LLP  
1745 Broadway, 18th FL  
New York, NY 10019

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: All purposes allowed by law.

**ARTICLE IV SHARES**

The number of shares of stock is: **200 shares**

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Paavo Jarvi, President and Secretary  
Address: c/o Spielman Koenigsberg & Parker, LLP  
1745 Broadway, 18th FL  
New York, NY 10019

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

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: John A. Turner, Esq.  
Address: 515 N. Flagler Drive, Suite 600  
West Palm Beach, FL 33401

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: John A. Turner, Esq.  
Address: 515 N. Flagler Drive, Suite 600  
West Palm Beach, FL 33401

*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

12-12-12  
\_\_\_\_\_  
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

12-12-12  
\_\_\_\_\_  
Date

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TALLAHASSEE, FLORIDA