

P12000102912

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

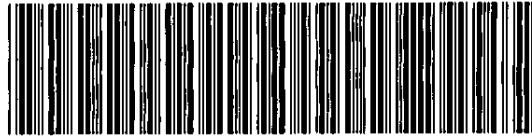
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000242683850

RECEIVED

DEPARTMENT OF STATE
DIVISION OF CORPORATION

2912 DEC 19 AM 11:07

NOT ACKNOWLEDGE
TO ACHIEVE
SUFFICIENCY OF FILING

FILED

12 DEC 19 AM 8:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

114



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 465385 7144592

AUTHORIZATION :

COST LIMIT : \$ 70

Spuddean

ORDER DATE : December 19, 2012

ORDER TIME : 8:36 AM

ORDER NO. : 465385-010

CUSTOMER NO: 7144592

DOMESTIC FILING

NAME: NO MORE TEARS PRODUCTIONS,
INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP
 ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Harry B. Davis - EXT. 2926

EXAMINER'S INITIALS: _____

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit).

ARTICLE I NAME No More Tears Productions, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
115 Sagamore Hill Road
Pittsburgh, PA 15239

FILED

12 DEC 19 AM 8:17

Mailing address, if different is:
Same as principal ~~street~~ address

TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any lawful purpose for which corporations may be organized under Chapter 607 of the Florida Business Corporation Act.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Abigale L. Miller, Director, Pres./Sec./Treas. Name and Title: _____
Address: 115 Sagamore Hill Road Address: _____
Pittsburgh, PA 15239

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Corporation Service Company
Address: 1201 Hays Street
Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: George Riley Thomas II, Esq.
Address: Metz Lewis Brodman Must O'Keefe LLC
535 Smithfield St., Suite 800, Pittsburgh, PA 15222

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
Corporation Service Company

By:

Required Signature/Registered Agent

Harry B. Davis
Asst. Vice President

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
George Riley Thomas II, Esq., Incorporator

December 19, 2012
Date