P1300007486

(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:				
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SECRETARY OF STATE ON DIVISION OF PORPORATIONS

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RECEIVED

2013 JAN 22 PH 12: 51

FLORIDA DEPARTMENT OF STATE SECRETARY OF STATE Division of Corporations TALLAHASSEE, FLORIDA

January 10, 2013

CLYDE WILCOX 20061 LARINO LOOP ESTERO, FL 33928-6363

SUBJECT: ULTIMATE ENTERTAINMENT, INC.

Ref. Number: W13000001994

We have received your document for ULTIMATE ENTERTAINMENT, 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):

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return 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) 245-6052.

Pamela Smith Regulatory Specialist II

Letter Number: 013A00000745

Division of Comparations P.O. ROY 6327 Tallahasson Florida 3231/

COVER LETTER,

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

SUBJECT: UI	timate Entertainme	ent, Inc.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an o	original and one (1) copy of the arti	cles of incorporation and	d a check for:
☐ \$70.00 Filing Fee	•	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
FROM:	Clyde Wilcox	(Printed or typed)	
	20061 Larino Loop)	
-	A	Address	
	Estero, FL 33928-		
_	City,	State & Zip	
	(573) 552 - 5996		
-	Daytime T	elephone number	
l	osagerx@yahoo.com		
-	E-mail address: (to be use	d 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 NAM The name of the corporat		ment, Inc.	
	VCIPAL OFFICE Principal street address -OOD		Mailing address, if different is:
Estero,FL- 339			
	ne corporation is organized is:		
To start a bus	iness that would include	a restaura	nt and an entertainment
venue.			T3
			JAN GREET
	· · · · · · · · · · · · · · · · · · ·		22 7
			H 2: 38
			38
	TAL OFFICERS AND/OR DIRECTOR Clyde Wilcox		Madonna Wilcox
Address	President & CEO	_ Address:	Vice-President & CFO
	20061 Larino Loop		20061 Larino Loop
	Estero, FL 33928-6363	-	Estero, FL 33928-6363
Name and Title:		_ Name and Title	
Address		_ Address:	
		_	
Name and Title:		- Name and Title	
Address		_ Address:	
		-	

Name an	d Title:	Name and Title:
Address		Address:
A DOLOT D VII		DIVISED DIVISED
ARTICLE VI The name and F	REGISTERED AGENT lorida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	Clyde Wilcox	22
Address:	20061 Larino Loop	PH 2
	Estero, FL 33928-6363	PH 2: 38
ARTICLE VII	INCORPORATOR	
The name and a	ddress of the Incorporator is:	
Name:	Clyde Wilcox	
Address:	20061 Larino Loop	
	Estero, FL 33928-6363	
Having been nar this certificate, I	med as registered agent to accept service of process am familiar with and accept the appointment as reg	for the above stated corporation at the place designated in istered agent and agree to act in this capacity
	Required Signature/Registered Agent	January 6, 2013
	Required Signature/Registered Agent	Date
I submit this document to the	cument and affirm that the facts stated herein are t Department of State constitutes a third degree felony	true. I am aware that the false information submitted in a vas provided for in s.817.155, F.S.
	Required Signature/Incorporator	January 6, 2013