P13000014223

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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SECRETARY OF STATE
TAIL AHASSEE, FLORIDA

× 02/12/13



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED ...
2013 FEB 11 PH 1: 13

SCORETARY OF STATE TALLAHASSEE, FLORIDA

January 31, 2013

ALTON N. DRUMMOND 3900 N.W. 171 STREET MIAMI GARDENS, FL 33055

SUBJECT: FIREHOUSE STUDIOS LLC INC.

Ref. Number: W13000006153

We have received your document for FIREHOUSE STUDIOS LLC INC. and your check(s) totaling \$79.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form filled out is to register a PROFIT INCORPORATION. The suffix LLC cannot be used in a Corporate Name.

Please return the corrected original and one copy of 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.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 813A00002507

www.sunbiz.org

Division of Communations D.O. DOV 6007 Wellshammer Elected 0001

COVER LETTER

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

SUBJECT:	Firs House S (PROPOSED CORPORA)	tedios I	ین در			
	(PROPOSED CORPORA'	TE NAME – <u>MUST INCLI</u>	UDE 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 & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED			
FROM: Alton N Daumno-d Name (Printed or typed)						
_	3900 N.	₩ 171 ST				
	MIAMI Gardens Fla 33055					
_	786 Daytime To	229. 35	05			
·	E-mail address: (to be used	Ste hotmai	otification)			

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)

RTICLE I	<u>NAME</u>	e: Fine Ho	\\ \tag{\fit}	. 1:-0		^	
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RTICLE II	PRINCIPAL C						
Principal street address			Mailing ac	ddress, if diffe	rent is:		
390	30 N.L	171 ST	_				
na la	C_1	c 33055	_				
IVIC		3-30	_				
RTICLE III	PURPOSE		.4	(10 and) - 65 '	1 0	4
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Name and	Title:	Name and Title:
Address		Address:
ARTICLE VI	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:		
Address:	Alton N DRUMMON 3900 N.W 17) ST M'AMI FLC 3305	CAE
	MIAMI F/6 3305	SSET
ARTICLE VII	INCORPORATOR	FIGURE 1
The name and add	dress of the Incorporator is:	RIDA ATE
Name:	Alton N DRUMM	ord
Address:	3900 N.W 1715T MiAWI THE 33050	.
	MiAWI Fla 33050	3
	ed as registered agent to accept service of process m familiar with and accept the appointment as regi	for the above stated corporation at the place designated in istered agent and agree to act in this capacity
	A Committee of the Comm	2.7./3
	Required Signature/Registered Agent	Date
I submit this docu document to the D	ment and affirm that the facts stated herein are t epartment of State constitutes a third degree felony	true. I am aware that the false information submitted in a was provided for in s.817.155, F.S.
	A H	<u> 2. 7.13</u>
	Required Signature/Incorporator	Date
	V 1	