

P13000023346

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

(Business Entity Name)

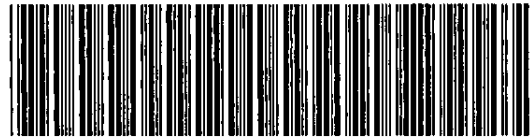
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

~~W13 10989~~

Office Use Only



500244564725

02/21/13--01025--010 \*\*78.75

77

13 MAR 12 PM 4:24

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

114

## COVER LETTER

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

**SUBJECT: LIGHT TUNNEL STUDIOS**

(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: TIMOTHY SANTANA**

Name (Printed or typed)

**13351 NW 1ST AVENUE**

Address

**MIAMI, FLORIDA 33168**

City, State & Zip

**305-588-1515**

Daytime Telephone number

**MEDIAMAN247@GMAIL.COM**

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

**NOTE: Please provide the original and one copy of the articles.**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 22, 2013

TIMOTHY SANTANA  
13351 NW 1ST AVENUE  
MIAMI, FL 33168

SUBJECT: LIGHT TUNNEL STUDIOS  
Ref. Number: W13000010989

We have received your document for LIGHT TUNNEL STUDIOS 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 name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 013A00004427

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

**FILED**

**ARTICLE I NAME**

The name of the corporation shall be: LIGHT TUNNEL STUDIOS, INC.

13 MAR 12 PM 4:24

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different

13351 NW 1st Avenue

Miami, Florida 33168

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Any and all lawful Business

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Timothy Santana, President/D

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

Address 13351 NW 1st Avenue

Address: \_\_\_\_\_

Miami, Florida 33168

Name and Title: Barbara Santana VP/D

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

Address 13351 NW 1st Avenue

Address: \_\_\_\_\_

Miami, Florida 33168

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

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

Address \_\_\_\_\_

Address: \_\_\_\_\_

(conti.)

FILED

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

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

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

13 MAR 12 PM 4:24

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE VI REGISTERED AGENT**

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

Name: \_\_\_\_\_

Barbara Santana

Address: \_\_\_\_\_

13351 NW 1st Avenue

Miami, Florida 33168

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: \_\_\_\_\_

Barbara Santana

Address: \_\_\_\_\_

13351 NW 1st Avenue

Miami, Florida 33168

*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

2-17-13

\_\_\_\_\_  
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

2-17-13

\_\_\_\_\_  
Date