## P1300027517

(Requestor's Name)		
(Address)		
(Ad	dress)	<del></del>
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
<b>(</b> Bu	siness Entity Na	me)
(Document Number)		
Certified Copies	_ Certificate	s of Status
Special Instructions to Filing Officer:		
Office Use Only		



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TILED

13 MAR 25 PM 1: 0

SECRETARY OF STATE

ALL ADVISED FOR THE

T. BUTCH MAR 2 PUBL

## **COVER LETTER**

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

SUBJECT: K	T Dance	Production	ons inc	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCLI</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	l 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 CO	PY REQUIRED	
FROM:				
6543 NW 14 Ct				
Address  Miami Fl 33147  City, State & Zip				
Daytime Telephone number				
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)

The name of the corporation		re Productio	ns inc.
Pr	CIPAL OFFICE incipal street address	Mailing addr	ess, if different is:
MICITI	+1 33141		
_	OSE corporation is organized is:	any and al	1 19wful
			FILI 13 HAR 25 SECRETAR
ARTICLE IV SHARI	<u>es</u> ck is: <u>100 Shares a</u>	+ #1 Mench	PH #: 05
	L OFFICERS AND/OR DIRE		
Name and Title: Address	•	Name and Title:Address:	
		Name and Title:Address:	

Name an	d Title:	Name and Title:		
Address		Address:		
ARTICLE VI	REGISTERED AGENT			
The name and F	orida street address (P.O. Box NOT acceptable) of	f the registered agent is:		
Name:	Geo Smith	TALL		
Address:	6543 NW 14 Ct	MAR 2 LAND		
	M19m1 +1 33147	TILED 125 PM 1APY SELLER		
ARTICLE VII	INCORPORATOR	H L 05		
The <u>name and ad</u>	Idress of the Incorporator is:	Q		
Name:	Goo Smith			
Address:	6543 NW 14Ct	-		
	miami fl 3247	•		
Having been nan this certificate, I d	ned 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		
		3/19/13		
I submit this doc	Required Signature/Registered Agent	Date 1		
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.				
		3/19/13		
	Required Signature/Incorporator	1 Date 1		