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COVER LETTER

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

SUBJECT: MOS	ST HIGH FILMS (PROPOSED CORPOR)	, INC. ate name – <u>must incl</u>	UDE SUFFIX)
Enclosed are an origi	inal and one (1) copy of the ar	ticles of incorporation and	a check for:
■ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REOUIRED

FROM:

STEPHEN LANG

Name (Printed or typed)

1840 S.E. 4TH AVENUE

Address

FORT LAUDERDALE, FLORIDA 33326

City, State & Zip

954-261-9463

Daytime Telephone number

MOSTHIGHFILMS@GMAIL.COM

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

2 man against (10 00 about 10) Island annual report nounceations

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)

of the corpora	ME MOST HIGH FILM	
E II PRI	Principal <u>street</u> address H AVENUE	S, INC. Mailing address, if different
E 2B		
	ERDALE, FLA. 33316	
LE III PUR	PPOSE the corporation is organized is: VIDEO	PRODUCTION SERVICE
LE IV SHA	ires 100	
LE V INI	ARES stock is: 100 TIAL OFFICERS AND/OR DIRECTOR:	
LE V INI	TIAL OFFICERS AND/OR DIRECTORS STEPHEN LANG/PRESIDENT	
LE V INI	TIAL OFFICERS AND/OR DIRECTORS STEPHEN LANG/PRESIDENT 1840 S.E. 4TH AVENUE	
LE V INT	STEPHEN LANG/PRESIDENT 1840 S.E. 4TH AVENUE SUITE 2B	Name and Title:
LE V INT	TIAL OFFICERS AND/OR DIRECTORS STEPHEN LANG/PRESIDENT 1840 S.E. 4TH AVENUE	Name and Title:
EV INF Name and Tith Address	STEPHEN LANG/PRESIDENT 1840 S.E. 4TH AVENUE SUITE 2B	Name and Title: Address:
EV INF Name and Tith Address	STEPHEN LANG/PRESIDENT 1840 S.E. 4TH AVENUE SUITE 2B FT. LAUD., FLA. 33316	Name and Title: Address: Name and Title:
Name and Title Address	STEPHEN LANG/PRESIDENT 1840 S.E. 4TH AVENUE SUITE 2B FT. LAUD., FLA. 33316	Name and Title: Address: Name and Title: Address:
Name and Title Address	STEPHEN LANG/PRESIDENT 1840 S.E. 4TH AVENUE SUITE 2B FT. LAUD., FLA. 33316	Name and Title: Address: Name and Title: Address:
Name and Title Address Name and Title Address	STEPHEN LANG/PRESIDENT 1840 S.E. 4TH AVENUE SUITE 2B FT. LAUD., FLA. 33316	Name and Title: Address: Name and Title: Address:

Name and	Title:	Name and Title:
Address		Address:
	REGISTERED AGENT	
Name:	rida street address (P.O. Box NOT acceptable) of STEPHEN LANG	the registered agent is:
Address:	1840 S.E. 4TH AVENUE, 2B	-
	FT. LAUD., FLA. 33316	-
ARTICLE VII	<u>INCORPORATOR</u>	
The <u>name and add</u>	ress of the Incorporator is:	
Name:	STEPHEN LANG	
Address:	1840 S.E. 4TH AVENUE, 2B	
	FT. LAUD., FLA. 33316	
Having been name this certificate, I an	d as registered agent to accept service of process n 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
Steph	Required Signature/Registered Agent	9/17/13 Date
I submit this document to the De	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 y as provided for in s.817.155, F.S.
Szeph	Required Signature/Incorporator	9/17/13 Date