## P14000000243

(Re	questor's Name)			
(Ad	dress)			
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(Cit	y/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nam	e)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

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14 JAN -2 PH 12: 56

SECRETARY OF STATE:
DIVISION OF CORPORATIONS

14 JAN -2 PM 1: 30

## **COVER LETTER**

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

SUBJECT: Mitchell	Entertainment, INC
	PORATE NAME - MUST INCLUDE SUFFIX
Enclosed are an original and one (1) copy of	the articles of incorporation and a check for:
□ \$70.00	& Certificate of Status
FROM: Vincent	Mi to Le //
	Name (Printed or typed)  -wood Drive Address
	Springs, FL 34688 Otty, State & Sp
516-9	744-7393
mitchen	ytime Telephone number  11 96 9 @ aol. com  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)

ARTICLE I The name of the co	NAME orporation shall be:	Mitche	11 Ente	Mainm	BNJ,	INC
ARTICLE II PRINCIPAL OFFICE Principal street address  1131 Mistwood Drive			Mailing address, if different is:			
Tarp	FL 3	16 88				
ARTICLE III The purpose for w	PURPOSE hich the corporation	is organized is: E1	shows	ment.	COMP	<u>'A</u> — — —
ARTICLE IV	SHARES					NAL 4
The number of share	res of stock is:	ers and/or direct	· Anna Ar -			2 PM 1:3
Name and		Mistwud Nistwud NSpring 4688			all and a second a	<u></u>
Name and	Title:		Name and Title:_			
Address			Address: _		·	
. •			_			<del></del>
Name and	Title:		Name and Title:_			
Address						
·	-		-			<del></del>

Name and Title:	Name and Title:	
Address	Address:	<del></del>
<del> </del>		
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box I  Name:  Address:  I arpor S	NOT acceptable) of the registered agent is:  Mitchell  Twood Prive  Springs FL 34688	muncls
ARTICLE VII INCORPORATOR		AN
The name and address of the Incorporator is:  Name:  Address:  Ila I Miss.	- Mitchell Fwood Drive Springs, FL 34688	N-2 PH 1: 30
	of service of process for the above stated corporation at the place deappointment as registered agent and agree to act in this capacity	esignated in
Required Signature/Re	egistered Agent Date	<u> </u>
	is stated herein are true. I am aware that the false information such a third degree felony as provided for in s.817.155, F.S.	bmitted in a
Required Signature/I	Incorporator Date	<u> </u>