

PI4 0000 204141

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

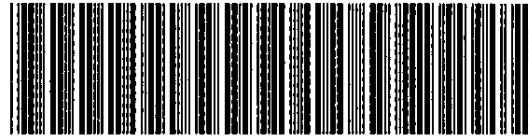
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000257083630

03/03/14--01020--004 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAR -3 AM 9:25

RCVS 3/4/14

COVER LETTER

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

SUBJECT: All Digital Post-Production Services Corp.
(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: George Ibarra
Name (Printed or typed)
20337 NE 2nd Ave # A-22
Address
Miami FL 33179
City, State & Zip
(786) 586-1194
Daytime Telephone number
JIHunter979@gmail.com
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)

ARTICLE I NAME

The name of the corporation shall be: All Digital Post-Production Services Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

20337 NE 2nd Ave #A-22
Miami FL 33179

P.O. BOX 695423
MIAMI FL 33269-5423

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Digital Services

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAR -3 AM 9:26

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: George Ibarra/Director Name and Title: _____

Address 20337 NE 2nd Ave #A-22 Address: _____
Miami FL 33179

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: George Ibarra

Address: 20337 NE 2nd Ave # A-22
MIAMI FL 33179

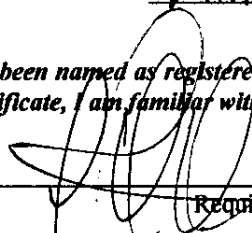
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: George Ibarra

Address: 20337 NE 2nd Ave # A-22
MIAMI FL 33179

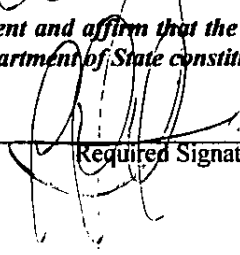
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

02/25/2014
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

02/25/2014
Date