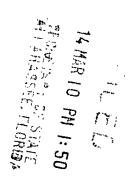
## P14000033482

(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:				



100257623771

03/10/14--01032--017 \*\*70.00



Office Use Only

mD3/12

## **COVER LETTER**

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

SUBJECT: ROC	k Solid Entertair	nment Inc.	
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d 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 REQUIRED
FROM: C	hristopher Wood	drow McAnuff (Printed or typed)	
97	711 NW 24th Str	reet	
S	unrise, FL 33322		
	City	, State & Zip	

954-818-1539

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

Daytime Telephone number

therockgrp@gmail.com

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

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

ARTICLE I NAI The name of the corpora	ME Rock Solid Entert	ainment Ind	14 H
	NCIPAL OFFICE		70 70
	Principal street address	1	Mailing address, if different is:
9711 NW 24th	Street	***************************************	P P III
Sunrise, FL 3	3322		1:5 ORA
			in O
	POSE To provi	de theatrical	and recorded performances.
The purpose for which t	the corporation is organized is:	do inodinodi	
<u></u>			
	LDPC		
The number of shares of	Stock is: 100		
		00	
	rial officers and/or director :: Christopher W McAnuff		President
Address	9711 NW 24th Street	Address:	9711 NW 24th Street
Address	Sunrise, FL 33322	_ Audiess.	Sunrise, FL 33322
		<del></del>	
Name and Title	;	_ Name and Title	·
Address		_ Address:	
		<del></del>	
		_	
No	_	Name and Title	
	-		<u>-</u>
Address		_ Address:	

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Christopher W McAnuff  9711 NW 24th Street  Sunrise, FL 33322  ARTICLE VII INCORPORATOR	
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name:  Ohristopher W McAnuff  9711 NW 24th Street  Sunrise, FL 33322  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Name:  Ohristopher W McAnuff  9711 NW 24th Street	
Address:  9711 NW 24th Street  Sunrise, FL 33322  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Name: Christopher W McAnuff  9711 NW 24th Street	
Address:  9711 NW 24th Street  Sunrise, FL 33322  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Name: Christopher W McAnuff  9711 NW 24th Street	
Sunrise, FL 33322  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Name:  Christopher W McAnuff  9711 NW 24th Street	
The name and address of the Incorporator is:  Name: Christopher W McAnuff  Address: 9711 NW 24th Street	
Name: Christopher W McAnuff 9711 NW 24th Street	MAR 10
Address:	R T
Address:	- (
Sunrise, FL 33322	50
Having been named as registered agent to accept service of process for the above stated corporation at the pl this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capac	
Unio MAH (1) 03/03/	/2014
Required Signature/Registered Agent	Date
I submit this document and affirm that the facts stated herein are true. I am aware that the false information document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	on submitted in a
	3/2014
Required Signature Incorporator	Date