

P14000076033

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

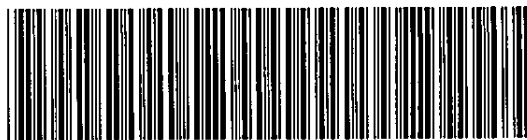
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100264355851

RECEIVED
DEPARTMENT OF STATE
14 SEP 15 PM 4:18

FILED
14 SEP 15 AM 8:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

156 9/16/14



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 297369 7220788

AUTHORIZATION :

COST LIMIT : \$ 78.75

ORDER DATE : September 15, 2014

ORDER TIME : 3:31 PM

ORDER NO. : 297369-005

CUSTOMER NO: 7220788

DOMESTIC FILING

NAME: WALKING TREE ARTS CORP.

EFFECTIVE DATE:

☒ ARTICLES OF INCORPORATION
☐ CERTIFICATE OF LIMITED PARTNERSHIP
☐ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☐ PLAIN STAMPED COPY
☒ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams - EXT. 62935

EXAMINER'S INITIALS: _____

FILED
14 SEP 15 AM 8:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Walking Tree Arts Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

50 South Pointe Dr.

Unit 1003

Miami Beach, FL 33139

Mailing address, if different as

270 Lafayette Street

Suite 1101

New York, NY 10012

FILED

14 SEP 15 AM 8:20

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to conduct any lawful business whatsoever that may be
conducted by corporations pursuant to Florida statutes.

ARTICLE IV SHARES

The number of shares of stock is: 100 shares, no par

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

(conti.)

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: Corporation Service Company
Address: 1201 Hays Street
Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Joshua N Cohen
Address: Cohen & Coleman LLP
767 Third Ave 31st Fl
New York, NY 10017

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
Corporation Service Company

By: [Signature] Asst. VP
Required Signature/Registered Agent

09.15.2014
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.

[Signature]
Required Signature/Incorporator

9/15/14
Date

FILED
14 SEP 15 AM 8:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA