(Re	equestor's Name)	
(Ad	ldress)	
(Ac	dress)	
(Cir	ry/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Only	, , , , ,



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12/01/14--01028--021 \*\*78.75

## **COVER LETTER**

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

SUBJECT: TOP	TICKETS, INC.			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u> I	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	d a check for:	7
\$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  PPY REQUIRED	
FROM: T	OP TICKETS, IN	C. (Printed or typed)		
70	050 W. PALMETT	O PARK RD.	.#15-833	
	Ā	Address		
B	OCA RATON, FL			
56	City, 61-716-3111	State & Zip	3-46·	-4
	Daytime To	elephone number		1 <b>4</b> 0
<u>P/</u>	AUL@PAYCHXSER E-mail address: (to be used		, , , , , , , , , , , , , , , , , , ,	
1	E-mail address: (to be used	·		

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

ARTICLE I NAI The name of the corpora	TOP TICKETS, IN	C.	FILED
	NCIPAL OFFICE		14 DEC -1 PH 1: 36
7050 W. PALME	Principal street address TTO PARK RD., #15-833	Mail	ing address, if different is:
BOCA RATO			The second and the second seco
ARTICLE III PUR	POSE	<del> </del>	
	the corporation is organized is:		<del> </del>
PRINTING SE	RVICES		
·			
		7.174	<u> </u>
APTICLE IV SHA	APPS 1000		
ARTICLE IV SHA The number of shares of	stock is: 1000		
		_	
	TIAL OFFICERS AND/OR DIRECTOR: JACK BELLINATO, PRESIDENT	-	
Name and Title	v•	Name and Title:	
Address	7050 W. PALMETTO PARK RD.	Address:	
	#15-833		
	BOCA RATON, FL 33433		
Name and Title	:	Name and Title:	
Address			
Address		Address:	
		<u></u>	
Name and Title	·	Name and Title:	
Address		Address:	
			· · · · · · · · · · · · · · · · · · ·

Name	and Title:	Name and Title:
. Addre	ess	Address:
ARTICLE VI he name and	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable) or	f the registered agent is:
Name:	PAUL RODGERS	
Address:	7050 W. PALMETTO PARK RD.,#15-833	- I
1441055.	BOCA RATON, FL 33433	-
<u>RTICLE VI</u>	I INCORPORATOR	
he <u>name and</u>	address of the Incorporator is:	
Name:	PAUL RODGERS	-
Address:	7050 W.PALMETTO PARK RD.,#15-833	
	BOCA RATON, FL 33433	-   <del>-</del>
	named as pegistered agent to accept service of process I am familial with and accept the appointment as reg	s for the above stated corporation at the place designated is gistered agent and agree to act in this capacity 11-19-14
V		
<i>Y</i>	Required Signature/Registered Agent	Date
submit this d		true. I am aware that the false information submitted in
submit this d locument to th	locyment and affirm that the facts stated herein are	true. I am aware that the false information submitted in a sy as provided for in s.817.155, F.S. 11-19-14