## P15000039/25

(Requestor's Name)			
(Add	(Address)		
(Add	dress)		
(City	//State/Zip/Phone	e #)	
PICK-UP	WAIT	MAIL	
(Rus	siness Entity Nar	ne)	
(500	sinoco Enaty Mar	,	
(D <sub>0</sub>	cument Number)		
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Certified Copies	Certificates	s of Status	
Special Instructions to F	Filing Officer:	·	

Office Use Only



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FILING CANCELLED RETURNED CHECK

15 APR 28 PH #: 45
SECRE FURT FOR STATE
TALLAHASSEE, FLORIBA

## **COVER LETTER**

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

SUBJECT:	Ludio FAN Atica	Incorporat	d
Enclosed are an orig	ginal and one (1) copy of the art	ticles of incorporation and	l 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 CO	
FROM:	I CNORRIS Name	Edwards e (Printed or typed)	
	1445 NW and St.	<u>0.0}+ 38-2</u> Address	
	Fort Lauderdale City,	FL 33311 State & Zip	<u></u>
	(347) 241-34 Daytime T	니니 3 elephone number	
	AFT ncorpor E-mail address: (to be use	d for future annual report	ok com

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) FILING CANCELLEI RETURNED CHECK

he name of the cornors	tion shall be: Audio FANATI	e the second second			
		CS - (EC) PC("	STEEL		
ARTICLE II PRINCIPAL OFFICE Principal street address		Mailing ad	Mailing address, if different is:		
1445 NW 20	d St unit 38 - 2	Same			
Fort Caudend	k. , FC 33311				
	POSE he corporation is organized is: Any of Commer electron				
			74 <b>5</b>		
	100000000000000000000000000000000000000		APR 2		
	RES stock is: 100  TIAL OFFICERS AND/OR DIRECTOR		28 PH E: 45 ASSEE, PLONIBA		
Name and Title	Denscris Edwards/cec	Name and Title:			
Address	1445 NW 2nd St	Address:	<u> </u>		
	mit 38-2				
	FOR LAWORDINE, FL 53311				
Name and Title:		Name and Title:			
Address					
Name and Title:		Name and Title:			
Address		Address:			

## FILING CANCELLED RETURNED CHECK

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NO)	f acceptable) of the registered agent is:
Name: Dorreis Edwar	d'S
Address: 1445 Nw 2nd St	unit 35-2
Fort Lawlerdale, Fl	<u> 33511</u>
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Name: Dencers Edu	chair.
Address: 1445 NW Frui 3	. <u>unit 38-2</u>
Fort Landerdale, F	<u>z 33311</u>
	vice of process for the above stated corporation at the place designated in pintment as registered agent and agree to act in this capacity
Required Signature/Register	red Agent
	ted herein are true. I am aware that the false information submitted in a red degree felony as provided for in s.817.155, F.S.