

P1500007770

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

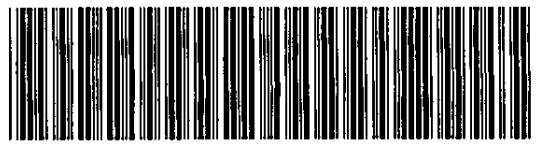
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/14/15--01017--003 **70.00

15 SEP 14 PM 2:25

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COVER LETTER

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

SUBJECT: Thunder Entertainment Enterprises, Inc

(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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Sandra Matsuoka

Name (Printed or typed)

12370 NW 51 ST

Address

Coral Springs, FL 33076

City, State & Zip

954-918-9033

Daytime Telephone number

sandramatsuoka@msn.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: Thunder Entertainment Enterprises, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

12370 NW 51 ST

Coral Springs , FL 33076

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sandra Matsuoka

Name and Title: Margarita Matsuoka

Address

Address:

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: Sandra Matsuoka _____

Address: 12370 NW 51 ST _____

Coral Springs, FL 33076 _____

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ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Sandra Matsuoka _____

Address: 12370 NW 51 ST _____

Coral Springs, FL 33076 _____

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 09/10/2015 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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:

 Sandra Matsuoka
Required Signature/Registered Agent

09/10/2015
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.

 Sandra Matsuoka
Required Signature/Incorporator

09/10/2015
Date