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OCT 23 2015 T SCHROEDER CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 842794 4305329

AUTHORIZATION 🛴

COST LIMIT : (7)\$_70.00

ORDER DATE : October 22, 2015

ORDER TIME : 8:35 AM

ORDER NO. : 842794-010

CUSTOMER NO: 4305329

DOMESTIC FILING

NAME:

INTERNATIONAL MARKETING AND

PROMOTIONS, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION

CERTIFICATE OF LIMITED PARTNERSHIP

ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams - EXT. 62935

EXAMINER'S INITIALS:

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

ARTICLE I NAME The name of the corporat	tion shall be:	TING AND PROMOTIONS, INC	
ARTICLE II PRINC 12717 W. Sunrise Boul	Principal street address	Mailing address	, if different is:
Sunrise, Florida 33323	· · ·		
		AND COMPANY AND ADDRESS AND AD	· · · · · · · · · · · · · · · · · · ·
ARTICLE III PURPO	DSE he corporation is organized is: to engage in the Florida Business Corporation Act.	any activity within the purposes	for which corporations
may be organized under	the Florida Business Corporation Act.	4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4	
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	**************************************	111111111111111111111111111111111111111	<u></u>
ARTICLE IV SHARI The number of shares of			SECKETA JIVISION OF
ARTICLE V INITIA	L OFFICERS AND/OR DIRECTORS		23
Name and Title	Michael Harris, President	Name and Title:	2 2
Address	12717 W. Sunrise Boulevard, Suite 135	Address:	T 23 PM 12: 20
	Sunrise, Florida 33323		23 gr
			· .
Name and Title:	Ronald M. Prupis, Secretary	Name and Title:	
	12717 W. Sunrise Boulevard, Suite 135	Address:	
Address	Sunrise, Florida 33323	Audress.	
		<u> </u>	
Name and Title:	<u></u>	Name and Title:	
Address		Address:	

Addres	·s	Address:
	REGISTERED AGENT Torida street address (P.O. Box NOT acceptable	e) of the registered agent is:
e:	Ronald M. Prupis	
ess:	12717 W. Sunrise Boulevard, Suite 135	
	Sunrise, Florida 33323	
		— 5 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6
CLE VII	INCORPORATOR	OCT 23
ame and	address of the Incorporator is:	3 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
me:	Neil L. Prupis, Esq.	
ddress:	80 Main Street, Suite 350	PM 12: 20
	West Orange, New Jersey 07052	——————————————————————————————————————
	EFFECTIVE DATE:	
	f other than the date of filing:	(OPTIONAL) nnot be more than five business days prior or 90 business
after the i	filing.)	able statutory filing requirements, this date will not be listed as
ng been no ertificate, i	imed as registered agent to accept service of pro I am familiar with and accept the appointment as	ocess for the above stated corporation at the place designated in a registered agent and agree to act in this capacity
	Payring Signature Department Assess	/0/9/15 Date
ld M. Pruj		
mit this do nent to the	ocument and affirm that the facts stated kerein Department of State constitutes a third degree f	are true. I am aware that the false information submitted in a clony as provided for in s.817.155, F.S.
		10/22/,5
	uired Signature/Incorporator	