

P15000089255

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

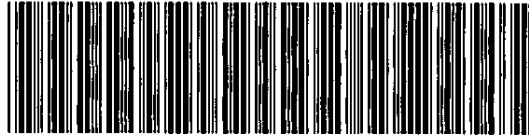
(Document Number)

Certified Copies _____ Certificates of Status _____

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15 OCT 26 PM 4:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Bush NOV 02 2015

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COVER LETTER

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

SUBJECT: Audio Fanatics 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
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 COPY REQUIRED

FROM: Denorris Devon Edwards
Name (Printed or typed)

1445 NW 2nd St Bldg 38-2
Address

Fort Lauderdale, FL 33311
City, State & Zip

954-330-2454
Daytime Telephone number

audiofanaticsinc@gmail.com
E-mail address: (to be used for future annual report notification)

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

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RETURNED CHECK

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: Audio Fanatics Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1445 NW 2nd St

P.O. Box 110

Bldg 38-2

Fort Lauderdale, FL 33311

Fort Lauderdale, FL 33302

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any and all unlawful business

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TALLAHASSEE FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Dennis Edwards / CEO Name and Title: _____

Address Dennis F 1445 NW Address: _____

2nd St, Bldg 38-2

Fort. Lauderdale, FL 33311

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: Denorris Edwards

Address: 1445 NW 2nd St Apt 2

Fort Lauderdale, FL 33311

ARTICLE VII INCORPORATOR

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

Name: Denorris Edwards

Address: P.O. Box 110

Fort Lauderdale, FL 33302

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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.

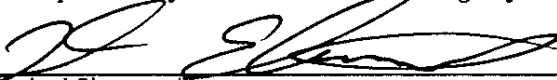
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

10/19/15
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.



Required Signature/Incorporator

10/19/15
Date