

PI6000008156

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

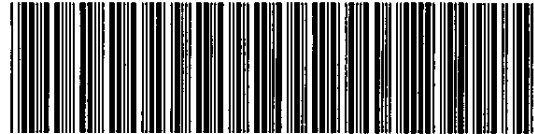
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2016 JAN 11 PM 2:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 28 2016

T. BROWN

COVER LETTER

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

SUBJECT: STAMPEDE MEDIA PRODUCTIONS CORP

(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: MICHEL A PEREZ
Name (Printed or typed)
2660 SW 156TH PL
Address
MIAMI, FL. 33185
City, State & Zip
786-403-6958
Daytime Telephone number
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: STAMPEDE MEDIA PRODUCTIONS CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

2660 SW 156TH PL

MIAMI, FL. 33185

Mailing address, if different is:

2660 SW 156TH PL

MIAMI, FL. 33185

ARTICLE III PURPOSE

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

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MICHEL A PEREZ-PRESIDENT

Name and Title: _____

Address 2660 SW 156TH PL

Address: _____

MIAMI, FL. 33185

Name and Title: LAZARO J PEREZ-SECRETARY

Name and Title: _____

Address 2660 SW 156TH PL

Address: _____

MIAMI, FL. 33185

Name and Title: LEOVEL CANCINO-V PRESIDENT

Name and Title: _____

Address 2660 SW 156TH PL

Address: _____

MIAMI, FL. 33185

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TALLAHASSEE, FLORIDA

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: MICHEL A PEREZ
Address: 2660 SW 156TH PL
MIAMI, FL. 33185

ARTICLE VII INCORPORATOR

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

Name: MICHEL A PEREZ
Address: 2660 SW 156TH PL
MIAMI, FL. 33185

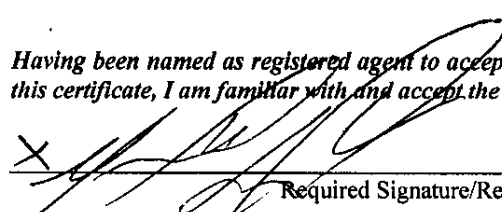
ARTICLE VIII EFFECTIVE DATE:

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

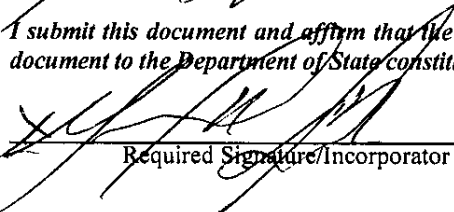
(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

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

X  _____ 01/04/2016
Required Signature/Registered Agent 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.

X  _____ 01/04/2016
Required Signature/Incorporator Date