

P18000029899

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

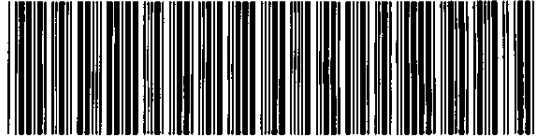
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100311233251

04/02/18--01006--005 \*\*787.50

FILED  
2018 MAR 30 PM 3:53  
TALLAHASSEE, FLORIDA

FILED  
2018 MAR 30 PM 4:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Digital Pimp 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: Stanley Hough  
Name (Printed or typed)  
5065 200th Trail North  
Address  
Loxahatchee, Florida 33470  
City, State & Zip  
561-333-7256  
Daytime Telephone number  
livewireproduction@hotmail.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: Digital Pimp Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5065 200th Trail North  
Loxahatchee, Fl. 33470

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any & All Lawful Business.

Monetizing & marketing Digital Assests, such as  
movies, music & video games, etc (all things digital)

ARTICLE IV SHARES

The number of shares of stock is: 1,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Stanley Hough / Pres. CEO

Address: 5065 200th Trail North  
Loxahatchee, Fl.  
33470

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

FILED  
2018 MAR 30 PM 4:16  
SECRETARY OF STATE  
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: Stanley Hough  
Address: 5065 200th Trail North  
Loxahatchee, Fl. 33470

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Stanley Hough  
Address: 5065 200th Trail North  
Loxahatchee, Fl. 33470

**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 days prior or 90 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*

Stanley Hough  
Required Signature/Registered Agent

3-30-18  
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.*

Stanley Hough  
Required Signature/Incorporator

3-30-18  
Date