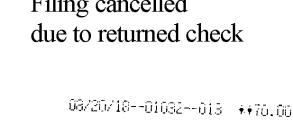
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(Requestor's Name)				
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
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COVER LETTER

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

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SUBJECT: WFOLTVY (PROPOSED CORPORA	CORP			
(PROPOSED CORPORA	ATE NAMÉ – <u>MUST INCLI</u>	<u>UDE SUFFIX</u>)		
Enclosed are an original and one (1) copy of the ar	ticles of incorporation and	a check for:		
\$70.00	\$78.75 Filing Fee & Certified Copy	& Certificate of Status		
ADDITIONAL COPY REQUIRED				
FROM: Ashley Gondon Name (Printed or typed)				
23589 East Colonial Prive				
Christmas Fl, 32709 City, State & Zip				
467-568- Daytime	-3 4-00 Telephone number			
E-mail address: (to be use	W FOLTU Co	onpo Com nonfication)		

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

Filing cancelled ARTICLES OF INCORPORATION due to returned check In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corporatio	n shall be: WFOLTV	4 Coup
ARTICLE II PRINCIP	PAL OFFICE rincipal street address	Mailing address, if different is:
23599 Chuist	East Colonial Du. mas Fl. 32709	POBOX 266 Christ mas Fl. 32
ARTICLE HI PURPOS The purpose for which the	E corporation is organized is:	Video Production
		1 Annt
ARTICLE IV SHARES The number of shares of st	ock is: 100 - 100% 0 U	med Buy ATheno Bowton
	officers and or directors AThena Bouto	Name and Title: Pre S
Address _	598 Futch Way SebASTion Fl	Address:
-	32958	
Name and Title:_	As bley Gordon	Name and Title: VP
Address _	23589 E. Colonial Christmas Fl. 3,	Address: 2709
-		None and 370 a
Name and Title:_ Address _		Name and Title: Address:
-		

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Address		Address:	
			
	<u>FISTERED AGENT</u> la street address (P.O. Box NOT acceptable) of	f the registered agent is:	
	Achley Gordon	i die reguitered agent is.	
		-	
Address:	23579 E. Colonio (Dr.	-	
	Christmas Fl. 327	69 -	
ARTICLE VIL INC	<u>ORPORATOR</u>		
The name and address	ss of the Incorporator is:		
Name:	Ashley Cordon 23589 E. Colonial	_	
Address:	23588 E. Colonial	Pr.	
, iddrew.	Christmas Fl. 3	3 2708	
	CUPICIT PROS 11.2		
ARTICLE VIII - FF	FECTIVE DATE:		
Effective date, if other	FECTIVE DATE: $g = 1.5 - 1.5$ r than the date of filing:	<u> </u>	NAL)
(If an effective date i filing.)	is listed, the date must be specific and canno	t be more than five da	ys prior or 90 days after the
Nate: If the date inse	erted in this block does not meet the applicable	statutory filino requires	ments, this date will not be listed as
	ive date on the Department of State's records.	······································	
Having been named	as registered agent to accept service of process	for the chora stated as	omoration at the place devianated in
	amiliar with and accept the appointment as res		
Ashh	1 Porton		8-12-18
	Required Signature/Registered Agent		Date
	ent and affirm that the facts stated herein are	true. I am aware that	
document to the Depo	artment of State constitutes a third degree felon		17.155, F.S.
Mr. Dlan	1. 1.		8-13-10

Filing cancelled due to returned check I Athena BARKIN is not going to refile Pocument # 14 0000 67415 of WFOLTUV Coup.