

P20000005100

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

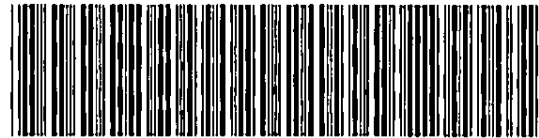
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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12/30/13--01031--012 **70.00

12/30/13 11:30 AM
000338250680
Filing Office

COVER LETTER

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

SUBJECT: S.F. National Entertainment 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: STEVEN COLMAN
Name (Printed or typed)

5125 68th WAY
Address

ST PETERSBURG FL 33709
City, State & Zip

Daytime Telephone number

STEVE.EZENT@GMAIL.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: S. F. NATIONAL ENTERTAINMENT INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5125 68th WAY

ST. PETERSBURG, FL. 33709

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ENTERTAINMENT

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: STEVEN COLMAN PRESIDENT

Name and Title: _____

Address

106 145th AVE E.

Address: _____

MADEIRA BEACH, FL

33708

Name and Title: DAREK WIKER VP

Name and Title: _____

Address

5125 68th WAY

Address: _____

ST. PETERSBURG, FL 33709

Name and Title: _____

Name and Title: _____

Address

Address: _____

FILED
19 DEC 30 PM 3:24
SECRETARY OF STATE
TALLAHASSEE, FL 32399

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: STEVEN COLMAN
Address: 5125 68th WAY
ST. PETERSBURG, FL. 33709

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: STEVEN COLMAN
Address: 5125 68th WAY
ST. PETERSBURG, FL. 33709

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19 DEC 30 PM 3:26
SECRETARY OF STATE
TALLAHASSEE, FL 32399-0001

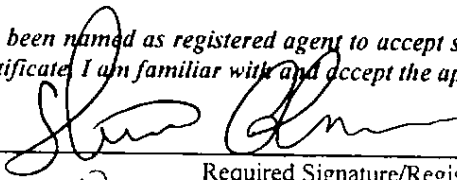
ARTICLE VIII EFFECTIVE DATE:

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

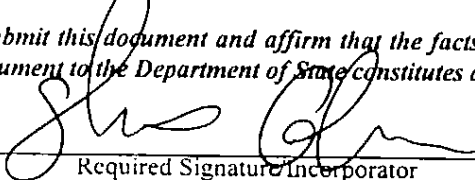


Required Signature/Registered Agent

12/27/19

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

12/27/19

Date