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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : VCORP SERVICES, LLC

Account Number : T20080000067 Phone : (845)425-0077 Fax Number : (845)818-3588

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Ac	idress:		_		_

FLORIDA PROFIT/NON PROFIT CORPORATION

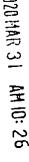
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Electronic Filing Menu

Corporate Filing Menu

Help



ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

he name of the corporat	itm shan be				
	<i>IPAL OFFICE</i> Principal <u>street</u> address		Mailing address, if different is.		
449 Via Vittoria Way			8449 Via Vittoria Way		
Orlando FI 32819		Orlando Fl 32819			
RTICLE III PURPO he purpose for which the	<u>SE</u> ne corporation is organized is:				
Veting/Television Hosti	ng/Entertainment and Advertising/Marke	eting.			
			70 7		
			25 % 50 0		
RTIÇLE IV ŞHARI	25				
he number of shares of			• • • • • • • • • • • • • • • • • • •		
			1,4		
	L OFFICERS AND/OR DIRECTORS		•		
Name and Title	John Wesley Chatham, President	Name and Title	Jennifer L. Brown-Chatham, Treasure		
Address	8449 Via Vittoria Way	Address:	8449 Via Vittoria Way		
	Orlando FI 32819		Orlando Fl 32819		
Name and Title:		Name and Title:			
Address		Address:			
					
Name and Title:		Name and Title	e:		
Address		Address:			

Name and Title:		Name and Title:		
Addres	s	Address:		
ARTICLE VI	REGISTERED AGENT	Nucleus and services and a sum to		
Name:	Vcorp Services, LLC	e) or the registered agent is:		
Address:	5011 South State Road 7, Suite 106			
	Davie, FL 33314			
ARTICLE VII	INCORPORATOR			
The name and a	nddress of the Incorporator is			
Name:	Jennifer L. Brown	<u></u>		
Address.	8449 Via Vittoria Way			
	Orlando Fl 32819			
	EFFECTIVE DATE:	(AMPRIANT A.		
(If an effective filing.)	f other than the date of filing:	nnot be more than five days p	orior or 90 days after the	
	e inserted in this block does not meet the applicate effective date on the Department of State's reconstruction.		ts, this date will not be listed as	
• • • • • • • • • • • • • • • • • • • •	imed as registered agent to accept service of pro I am familiar with and accept the appointment a	-	• •	
	an mile		3/30/2020	
	Required Signature Registered Agent	***	Date	
	cument and affirm that the facts stated herein			
document to the	Department of State constitutes a third degree j	felony as provided for in s.817.1	155, F.S.	
	CHEL		3/30/2020	
Requ	aired Signature/Incorporator		Date	