

P21000033043

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

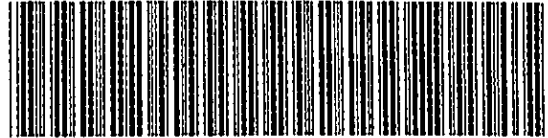
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Special Instructions to Filing Officer:

W21000028973

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02/09/21--01024--005 **87

SECRETARY OF
TALLAHASSEE, FL

R. WHITE
APR 11 2021



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 2, 2021

JOANNA KERRY
4028 CORNWALL B
BOCA RATON, FL 33434 US

SUBJECT: SHOW STOPPERS ENTERTAINMENT, INC.
Ref. Number: W21000028973

We have received your document for SHOW STOPPERS ENTERTAINMENT, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must include the purpose(s) for which the corporation is authorized in the home state or country to be carried out in the state of Florida. Please make such correction to number 8 of the application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler
Regulatory Specialist II

Letter Number: 021A00004463

COVER LETTER

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

SUBJECT: _____

Show Stoppers 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: _____

Joanna KERRY

Name (Printed/or typed)

4028 Cornwall B

Address

Boca Raton, FL 33434

City, State & Zip

561-923-9188

Daytime Telephone number

/cell: 954-579-4422

jsokerry@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: Show Stoppers Entertainment, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

4028 Cornwall B
Boca Raton, FL 33434

2021 FEB 9 PM 12:59
Mailing address, if different is:

SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To Book Entertainment and Performers.

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DAVID KERRY / PRES Name and Title: _____

Address: 4028 Cornwall B Address: _____
Boca Raton, FL
33434

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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: ALAN COHEN

Address: 1805 ELEUTHERA PT.

(SUITE 2)
COCONUT CREEK, FL
33066

ARTICLE VII INCORPORATOR

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

Name: JOANNA KERRY

Address: 4028 CORNWALL B

BOCA RATON, FL 33434

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

[Signature]

Required Signature/Registered Agent

2/5/2021

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.

[Signature]

Required Signature/Incorporator

2/5/2021

Date