

P21000090633

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COVER LETTER

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

SUBJECT: BESSINGER PRODUCTIONS, 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: LARRY BESSINGER
Name (Printed or typed)

405 WILSON AVE.
Address

SATELLITE BEACH, FL 32937
City, State & Zip

N/A
Daytime Telephone number

mrchalk@farcetrek.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: BESSINGER PRODUCTIONS, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

405 WILSON AVE.
SATELLITE BEACH
FL 32937

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Production of movies, computer
animations, online media, computer software, written media,
audio media, software programs and apps, and any other
purpose the corporation desires. Will also merchandise,
via corporation, any production related merchandise. Will
hold conventions, marketing, broadcasting, and any other
venture corporation deems worthy of pursuit.

ARTICLE IV SHARES

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Larry Bessinger, P.D.

Name and Title: Maria Woffre, VP, D

Address: 405 Wilson Ave.
Satellite Beach
FL 32937

Address: 419 Wilson Ave.
Satellite Beach
FL 32937

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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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: Larry Bessinger

Address: 405 Wilson Ave.

Satellite Beach, FL 32937

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Larry Bessinger

Address: 405 Wilson Ave.

Satellite Beach, FL 32937

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 10/10/2021 (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

Larry Bessinger
Required Signature/Registered Agent

10/10/21
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.

Larry Bessinger
Required Signature/Incorporator

10/10/21
Date