

P21000101437

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

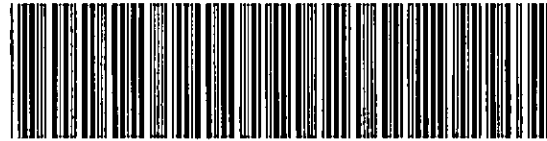
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DEC 03 2021

COVER LETTER

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

SUBJECT: HIPHOP MYWAY, 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: Messner Reeves LLP Attn: Brent Wadman
Name (Printed or typed)

1430 Wynkoop Street, Suite 300
Address

Denver, CO 80202
City, State & Zip

303-623-4809
Daytime Telephone number

bwadman@messner.com; sosreport@messner.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: HIPHOP MYWAY, INC

ARTICLE II PRINCIPAL OFFICE

Principal <u>street</u> address	Mailing address, if different is:
<u>12765 S. Parkland Bay Trail</u>	<u></u>
<u>Parkland, FL 33076</u>	<u></u>
<u></u>	<u></u>

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any lawful purpose.

ARTICLE IV SHARES

The number of shares of stock is: 1000000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Brian Carenard, President</u>	Name and Title: <u>Steven Gelley, Secretary</u>
Address <u>12765 S. Parkland Bay Trail</u>	Address: <u>12765 S. Parkland Bay Trail</u>
<u>Parkland, FL 33076</u>	<u>Parkland, FL 33076</u>
<u></u>	<u></u>

Name and Title: <u>David Rogove, Treasurer</u>	Name and Title: <u></u>
Address <u>12765 S. Parkland Bay Trail</u>	Address: <u></u>
<u>Parkland, FL 33076</u>	<u></u>
<u></u>	<u></u>

Name and Title: <u></u>	Name and Title: <u></u>
Address <u></u>	Address: <u></u>
<u></u>	<u></u>
<u></u>	<u></u>

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: Registered Agent Solutions, Inc.

Address: 155 Office Plaza Dr. Suite A

Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

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

Name: Brent Wadman

Address: 1430 Wynkoop St., Ste 300

Denver, CO 80202

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

Mackenzie Hart, Asst. Secretary
Required Signature/Registered Agent

11/22/2021
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

11/22/2021
Date