12200062211

(Re	equestor's Name)			
(Address)				
(Ac	ldress)			
(Ci	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate	s of Status		
Special Instructions to Filing Officer:				
		_		

Office Use Only



400391810414

08/01.23--01030--030 -+12.60

03.01, 22--01020--021 --73.73

CABLE AND/OR VIDEO
FRANCHISING
BIVISION OF CORPORATIONS
TALL ANASSEE, FLORIDA

2022 AUG - 1 AM 8: 4 7

COVER LETTER

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

SUBJECT:	L'on Heard PROPOSED CORPORA	TENAME-MUST INCLU	JDE SUFFIX
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
□ \$70.00 Filing Fec	Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
ER OM.	Martin L. Ta	ADDITIONAL CO	PYREQUIRED
FROM	2704 24th	e (Printed or typed) Address	
	Sorasota Fl		
	941-97 Daytime	77-1700 Telephone number	
	E-mail address: (to be use	a + 2 e gr	nail. (Om 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:	ead Entertainment, In
ARTICLE II PRINCIPAL OFFICE Principal street address 2704 24th Street Sacasota + 19334	Hailing address, if different is: 14 2 12 South Washington 1 Surasota, F. 54236
ARTICLE III PURPOSE The purpose for which the corporation is organized is: to and produce live performation and enter	munce events, for tainment purposes
	·
	Name and Title: Address:
Name and Title: Address	Name and Title: Address:
Name and Title:Address	Name and Title:

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: Wartin L. Taylor	<u>-</u>
Address: 270424th Street	_
Sarasota, FL 34236	2
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Name: Martin L Ta	1/12
#114 2410 (+1)	Washington Blud
Address: III & D &) Outh	o i
Surasota, FL 343	<u>1</u> 36
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing:	8,2022 Optional)
(If an effective date is listed, the date must be specific and can	
filing.)	
<u>Note:</u> If the date inserted in this block does not meet the applicable the document's effective date on the Department of State's record	
Having been named as registered agent to accept service of process certificate, I am familiar with and accept the appointment as regis	s for the above stated corporation at the place designated in this tered agent and agree to act in this capacity
Mast J = Z	7-10-22
Required Signature/Registered Agent	Date
I submit this document and affirm that the facts stated herein a	re true. I am aware that the false information submitted in a
document to the Department of State constitutes a third degree fel	ony as provided for in s.817.155, F.S.
	7-28-22
Required Signature/Incorporator	Date