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Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : HARVARD BUSINESS SERVICES, INC.

Account Number : I20080000045 Phone : (302)645-7400 Fax Number : (302)645-1280

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

DKasen@Inspired-Studios.com Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION

Inspired Studios, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLE 1 NAME The name of the corporati	Inspired Studios I	7 and/or Chapter 621, F.S. (Profit)	
ARTICLE IIPRINCI	-	Mailing address, if different is: 12862 Whitehorn Way, Boynton Beach.	F <u>L 33</u> 473
ARTICLE III PURPO. The purpose for which th	SE e corporation is organized is:	Nedia and Entertainment	
The number of shares of s	tock is: 100 Common Stock L OFFICERS AND/OR DIRECTOR. Donald Kasen President	<u>.</u> <u>.</u>	
ARTICLE IV SHARE The number of shares of s ARTICLE V INITIA Name and Title: Address	tock is: 100 Common Stock L OFFICERS AND/OR DIRECTOR. Donald Kasen President		
The number of shares of s ARTICLE V INITIA Name and Title	tock is: 100 Common Stock LOFFICERS AND/OR DIRECTOR, Donald Kasen, President	S	
The number of shares of s ARTICLE V INITIAL Name and Title: Address Name and Title:	Donald Kasen, President 12862 Whitehorn Way Boynton Beach, FL 33473	Name and Title: Address: Name and Title:	
The number of shares of s ARTICLE V INITIAL Name and Title Address	Donald Kasen, President 12862 Whitehorn Way Boynton Beach, FL 33473	Name and Title: Address: Name and Title: Address:	
The number of shares of s ARTICLE V INITIAL Name and Title Address Name and Title: Address	Donald Kasen, President 12862 Whitehorn Way Boynton Beach, FL 33473	Name and Title: Address: Name and Title: Address:	

			0044487 3)))
Name and Title:		Name and Title:	
Address		8 - J -	
ARTICLE VI I	REGISTERED AGENT orida street address (P.O. Box NOT acceptabl	E) of the registered arony in	
Name:	Registered Agents Inc.	oy or moregistered agent is:	
Address:	7901 4th Street N, Ste 300		
	St. Petersburg, FL 33702		
ARTICLE VII 1	NCORPORATOR		
The name and add	dress of the Incorporator is:		•
Name:	Donald Kasen		
Address:	12862 Whitehorn Way		
	Boynton Beach, FL 33473	<u> </u>	
ARTICLE YIII	EFFECTIVE DATE:		
Effective date, if or	ther than the date of filing: te is listed, the date must be specific and car	. (OPTIONAL) unot be more than five days prio	r or 90 days after the
Note: If the date in	nserted in this block does not meet the applical ective date on the Department of State's record	ble statutory filing requirements	
Having been name certificate, I am fan	d as registered agent to accept service of proces niliar with and accept the appointment as regis	s for the above stated corporation of tered agent and agree to act in this	nt the place designated in this capacity
	Required Signature/Registered Agent		02/02/2023
I conhamic distant			Date
document to the De	ment and affirm that the facts stated herein a partner of State constitutes a third degree fel	re true. I am aware that the false ony as provided for in s.817.155, F	information submitted in a S.
Paguina d Ci	whom		February 2, 2023
Required Signature	incorporator	Date	