

P24000058544

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

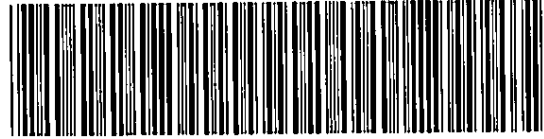
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Office Use Only



600435585396

2024 SEP 16 AM 10:44
ALLIANCE

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-54372
(850) 524-6243

Please use funds from the account: 120210000160:: \$_70.00_____

Authorization Signature: James Field

HZM Entertainment Inc.

Business

Document #

___ Walk in

___ Will wait

___ Certified Copy of the Articles

___ Certificate of Status

NEW FILINGS

___ Profit
___ Not for Profit
___ Limited Liability
___ Domestication
___ X INC
___ CORP
___ OTHER

AMENDMENTS

___ Amendment
___ Resignation of R.A. Officer/Director
___ Change of Registered Agent
___ Dissolution/Withdrawal
___ Conversion
___ Statement of FACT and Info.
___ Merger

OTHER FILINGS

___ Annual Report
___ Fictitious Name
___ Statement of Authority
___ APOSTIL _____

COUNTRY

REGISTRATION/QUALIFICATIONS

___ Foreign Filing
___ Partnership
___ Reinstatement
___ CORRECTION for a Foreign LLC
___ Domestication of a Foreign Corp.
___ Other

EXAMINER'S INITIALS: _____

COVER LETTER

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

SUBJECT: HZM 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Brett Isaac
Name (Printed or typed)

2151 University Blvd S
Address

Jacksonville, FL 32216
City, State & Zip

904-730-9264
Daytime Telephone number

Brett@isaactaxcpa.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: HZM Entertainment, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal <u>street</u> address <u>2071 Emerson St</u> <u>Jacksonville, FL 32207</u>	Mailing address, if different is:
--	---

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To operate an entertainment Business.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Haidar Kazim</u>	Name and Title: _____
-------------------------------------	-----------------------

Address <u>2071 Emerson St</u>	Address: _____
<u>Jacksonville, FL 32225</u>	_____
_____	_____

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: Brett Isaac

Address: 2151 University Blvd S

Jacksonville, FL 32216

ARTICLE VII INCORPORATOR

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

Name: Brett Isaac

Address: 2151 University Blvd S

Jacksonville, FL 32216

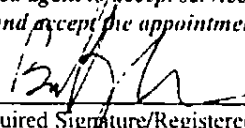
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 09/14/2024 (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.)

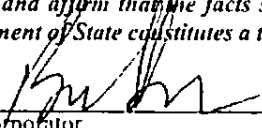
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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


Required Signature/Registered Agent

9/16/24
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.


Required Signature/Incorporator

9/15/24
Date