

P97000015266

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

FILED OF STATE  
SECRETARY OF CORPORATIONS  
97 FEB 13 AM 9:02

**SUBJECT:** SPLIT S PRODUCTIONS, INC.  
(Proposed corporate name - must include suffix)

400002086794--7  
-02/13/97--01042--013  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☒ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

**FROM:** Robert B. Reese, Jr.  
Name (Printed or typed)

952 Moss Lane  
Address

Winter Park, FL 32789  
City, State & Zip

407-644-5574  
Daytime Telephone number

5/8/18

**NOTE:** Please provide the original and one copy of the articles.

## ARTICLES OF INCORPORATION

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

### ARTICLE I NAME

The name of the corporation shall be:

SPLIT S PRODUCTIONS, INC.

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### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

222 WEST COMSTOCK AVENUE  
SUITE 204  
WINTER PARK, FL 32789

POST OFFICE BOX 478  
WINTER PARK, FL 32790-0478

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100,000

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

W. EDWARD MCLEOD, P.A.  
210 SOUTH ORANGE AVENUE  
SUITE 1010  
ORLANDO, FL 32801

**ARTICLE V INCORPORATOR(S)**

**See instructions for officers/directors**

**The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):**

ROBERT B. REESE, JR.  
952 MOSS LANE  
WINTER PARK, FL 32789

**The undersigned incorporator(s) has(have) executed these Articles of Incorporation this**

4th day of FEBRUARY, 19 97

**(An additional article must be added if an effective date is requested.)**

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

**NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is SPLIT S PRODUCTIONS, INC.

2. The name and address of the registered agent and office is:

W. EDWARD MCLEOD

(NAME)

201 SOUTH ORANGE AVENUE, SUITE 1010

(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

ORLANDO, FL 32801

(CITY/STATE/ZIP)

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

W. Edward McLeod  
(SIGNATURE)

2/10/97  
(DATE)

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