

P21000025022

Florida Department of State

Division of Corporations

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((H210001135173)))



H210001135173ABCV

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To:

Division of Corporations

Fax Number : (850)517-6381

From:

Account Name : DAKOTA ACCOUNTING SERVICES INC.

Account Number : 120160000034

Phone : (786)650-1600

Fax Number : (786)650-1601

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

Email Address: info@2020TAXPRO.COM

FLORIDA PROFIT/NON PROFIT CORPORATION

10 Twenty Music Inc.

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

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Corporate Filing Menu

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MAR 23 2022

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF
CORPORATIONS
FINANCIAL
SERVICES

COVER LETTER

Department of State
New Filings Section
Division of Corporations
P.O. Box 6227
Tallahassee, FL 32314

SUBJECT:

40 twenty music Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☒ \$78.75

Filing Fee

☒ \$78.75

Filing Fee

& Certificate of Status

☐ \$78.75

Filing Fee

& Certified Copy

☐ \$78.75

Filing Fee

& Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

2020TAX

13501 SW 128th ST STE217

Miami, FL 33186

FROM:

Name (Printed or typed)

Address

City, State & Zip

780-650-1100

Daytime Telephone number

info@2020TAXPRO.COM

E-mail address; (to be used for future annual report notification)

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



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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 611, F.S. (Part 1)

ARTICLE I NAME
The name of the corporation shall be 40 TWENTY MUSIC INC.

ARTICLE II PRINCIPAL OFFICE
Principal street address
14232 SW 47ST
MIAMI, FL 33175

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: All & any lawful
business

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Amanda Marie Gonzalez, President
Address: 14232 SW 47ST
MIAMI, FL 33175

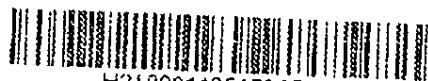
Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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Name and Title: _____

Address: _____

SECTION VI - REGISTERED AGENT

Name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: _____
Address: _____
2020TAX
13501 SW 128th ST STE217
Miami, FL 33186

SECTION VII - INCORPORATOR

Name and address of the incorporator is:

Name: _____
Address: _____
2020TAX
13501 SW 128th ST STE217
Miami, FL 33186

SECTION 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 entered 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.

I, the undersigned, as registered agent to accept service of process for the above stated corporation in the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

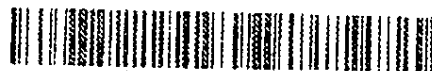
Registered Signature-Registered Agent

3/21/21
Date

I, the undersigned, do hereby swear and affirm that the facts stated herein are true. I am aware that the false information submitted on a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Registered Signature-Incorporator

3/21/21
Date



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TALLAHASSEE, FLORIDA