

7/20/2012 8:57:59 M CA 3/06 Flx Server

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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : 120000000195

Phone : (850) 521-0821

Fax Number : (850)558-1515

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annual report mailings. Enter only one email address please.	± 4 T1 ~ ∵	_	į.
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FOREIGN PROFIT/NONPROFIT CORPORATION JOHN LEGEND TOURING, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

J. Shivers JUL 31 2012 Help

COVER LETTER

TO: New Filing Sec Division of Cor					
SUBJECT:	JOHN LEGENS T	OURINA he.			
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Dear Sir or Madam:					
"Certificate of Existence		on for Authorization to Transac d Standing," and check äre subr business in Florida.			
Please return all corresp	ondence concerning this	matter to the following:			
	DAVED LEVEN				
	David Levin Na	me of Person			
	DL RUGNESS M	NAGEMENT.			
	Fift	n/Company			. 3
	200 WEST 577	STROET - SUITE 1403		SE SE) The state of the
		Address.			
	Naw York	Ny 10019 State and Zip code 2528M. CM used for future annual report n		w KA	at the table in
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For further information	concerning this matter, pl	ease call:	<u>i</u>	26 RIDA	gram.
BRIAN GR	EENBook at (212) 765 - 5600 Area Code & Daytime Telepho		_	
Name of Person	מ	Area Code & Daytime Telepho	one Number		
STREET/COU New Filing Sec	RIER ADDRESS:	MAIT.ÏNG AI New Filing Sec	ction		
Division of Cor Clifton Building		Division of Co	•		
2661 Executive Tallahassee, FL	Center Circle	P.O. Box 6327 Tallahassee, Fl			
Enclosed is a check for	the following amount:				
\$70,00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy.	S87.50 File Certificate Centified C	of Status &	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Enter pame of a "inc.," "Co.," "C	corporation; must include "INC forp," "Inc." "Co," or "Corp.")	oreorated," "Co	MPANY," "CORPORATION,"		-	
(if name eneval	labic in Florida, enter alternate	corporate name adopte	d for the purpose of transacting busin	ess in Florida)		
2	Now Your	3	フィー きがわりくち			
(State or country	under the law of which it is inc	corporated)	76- 07002:58 (FEI number, if applicable)			
4.	06/02/04	.5.	PERPETURE tion: Year corp. will cease to exist o			
(Date	e of incorporation)	(Dyra	tion: Year corp. will cease to exist o	i "beibernaj")	·•	
б					_	
	(Date first transi (SEE SECTIONS 607	ected business in Floric 7.1501 & 607.1502, F.S	la, if prior to registration) L, to determine penalty liability)			
7.	200 WEST 57M	STERET - SUITE NO	3 NEW YORK, NY 10019			
<i>y</i>		cipal office address)		******	-	
	Zeo WEST STM : (Curr	STIAT - SURT 1463 ent mailing address)	Now Yours, My 10019	Z SE		(
Ñ	Liv.	e Music Peneorua	V16	CRE)		
(Purpose(s) of corporation authorized in l	nome state or country-t	uce be carried out in state of Florida)	SSA	CO SALVAN	
9. Name and street	ci address of Florida register	ed agent: (P.O. Box	NOT acceptable)	HASSEE, FLO	Š	
` X :	Corporation Service Co	mnariv		ر بريا <u></u>	主門	
Ņame:		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		OR!	o the same	
Office Address:	1201 Hays Street	······································	•	DE C	ת ת	
	Tallahassee		Florida 32301 (Zip code)			
	(City)		(Zip code)			
Having been nam designated in this further agree to c	application, i hereby accep	t the appointment as fall statutes relative tions of my position i		f in this capa rmance of in	city. T	
<u>r</u>	By: (Registered age	Contraction of the contraction o	Cenne L. I Asst Vice P	Ounlap reeident		

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law-of which it is incorporated.

12. Names and	d business addresses of officers and/or directors:		
A. DIRECTO			
Chairman:	. Vehn Stephons		
Address:	200 WEST 57TH STRAT - #1403		
	NEW YEAR, MY 10019		
Vice Chairman:		,	
Address:			
			
Director:			
Address:			
Director:			
		·	
B. OFFICER	S	Z_{S}	_ (
President:	JOHN STEPHENS		<u> </u>
	200 WEST 5714 STAGET - # 1403	HA I	
	NON YORK, NY 10019	್ಲಿ ಗ್ರ⊤	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Address:		9: ORA	
		A S	
		,	·
Treasurer:			
Address:			
NOTE: If neg	essary, you may attach an addendum to the application listing a	dditional officers and/or directors.	
13:	see below		~
The officer of	Signature of Director or Officer director signing this document (and who is listed in number 12 a	above) affirms that the facts stated be	rein
are true and the	at he dr. the is aware that false information submitted in a docume long as provided for in s.817.155, F.S.	nent to the Department of State consti	itutes a
14 degree le			
	Typed or printed name and capacity of person signing	g application)	

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of JOHN LEGEND TOURING, INC. was filed on 06/02/2004, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



201207270572 * 45

Witness my hand and the official seal of the Department of State at the City of Albany, this 26th day of July two thousand and twelve.

Daniel Shapiro

First Deputy Secretary of State

