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S. FRANKLIN JUL 2 1 2022

COVER LETTER

TO:	Registration Section Division of Corporations					
SHRE	ECT: Music Hall Arts Alliance, Inc.					
3 C D3	Name of Corporation - must include suffix					
Dear S	Sir or Madam;					
Affairs	closed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to the above referenced not for profit corporation to conduct its affairs in Florida.					
Please	return all correspondence concerning this matter to the following:					
	Holly Brown					
	Name of Person					
	Music Hall Arts Alliance, Inc.					
•	Firm/Company					
	111 Pine Street					
	Music Hall Arts Alliance, Inc. Firm/Company 111 Pine Street 2E Address Albany, NY 12207					
	Address					
	Albany, NY 12207					
	City/State and Zip Code					
	holly.brown777@gmail.com					
	E-mail address: (to be used for future annual report notification)					
For fur	ther information concerning this matter, please call:					
Fradari	ck John 813 334.5656					
	at ()					
	Name of Person Area Code Daytime Telephone Number					
	Mailing Address:Street Address:Registration SectionRegistration Section					
	Division of Corporations Division of Corporations					
	P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810					
	Tallahassee, FL 32303					
Enclose	d is a check for the following amount:					
	ake check payable to: FLORIDA DEPARTMENT OF STATE. OU Filing Fee \$\sum \subseteq \$\\$78.75 \text{ Filing Fee & \$\sum \subseteq \$\sum \subseteq \$\\$87.50 \text{ Filing Fee,}					
¥·V1	00 Filing Fee					

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

(If name unav	vailable in Florida, enter alternate corp			
	anable in Florida, enter alternate cor	porate name adopted for	the purpose of transacting busines	ss in Florida)
New York		3 82-3612354		
(State or cou	intry under the law of which it is inco	rporated)	(FEI number, if applicable)	
December, 20)17 Date of Incorporation)	5.		
(Date of Incorporation)	(Date of duration, if other than perp	etual)
Date first conc	ducted affairs in Florida if prior to regis	aration. See sections 617.	1501 & 617.1502, F.S. to determine	penalty liability.
	et, 2E, Albany, NY 12207 (Pr	incipal office street ado	ress)	
		· ———	·	2622 J 1 1
				<u>.</u>
	(Curre	ent mailing address, if di	Herent)	
erforming an	ts presenter/promoter			⊸ i
'urpose(s) of	corporation authorized in home state	or country to be carried	out in the state of Florida)	
Name and str	reet address of Florida registered a	went: (P.O. Roy NOT	`accentable)	ري. پير
	<u></u>	igeni: (1:0: box <u>1101</u>	acceptable	ယ်
	Holly Brown			
Manue				
Name:	S67 Raychare Drive		·	
Name: ce Address:	567 Bayshore Drive			
Name: ce Address:	Holly Brown 567 Bayshore Drive Ellenton (City)	, Florida	34222	

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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTOR				
■ Chairman	Name:	□Chairman	Name: Holly Brown	
□Vice Chairman	Address: 21 Lodge St, Albany, NY 12207	□Vice Chairman	Address: H11 Pinc St, Albany, NY 12207	
Director		□Director		
□President		President		
□Vice President		□Vice President		
□Secretary	□Treasurer	☐ Secretary	Treasurer	
□Other:	Other:	□Other:	□Other:	
□Chairman	Name:	□Chairman	Crystal Moore Name:	
□Vice Chairman	Address: 24 Mountain Way, Troy, NY 12192.	□Vice Chairman	Address: 58 Remsen St, Cohoes, NY 12047	
Director		Director		
□President		□President	25/22	
■Vice President		□Vice President	, : 	
□Secretary	□Treasurer	■ Secretary	[]Treasurer	
□Other:	Other:	□Other:		
□ Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director		
□President		□President		
□Vice President		□Vice President		
□Secretary	□Treasurer	□Secretary	☐ Treasurer	
□Other:	Other:	□Other:	Other:	
13.	Notice: Use an attachment to report more than six duals may be added to the index when filing your Signature of Chairman Vice Chairman, or any off President (Typed or printed name and capacity of pe	Florida Department o	f State Annual Report form. 12 of the application)	

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name:

MUSIC HALL ARTS ALLIANCE, INC.

DOS 1D Number:

5245377

Entity Type:

DOMESTIC NOT-FOR-PROFIT CORPORATION

Entity Status:

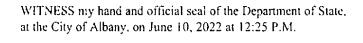
EXISTING

Date of Initial Filing with DOS:

12/05/2017

No information is available from this office regarding the financial condition, business activity or practices of this entity.





Brandon C. Hughan

ROBERT J. RODRIGUEZ, Secretary of State

OF NEW OF NEW OF STREET

By Brendan C. Hughes Executive Deputy Secretary of State

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