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COVER LETTER

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

SUBJECT: BLUE DOLPHIN MUSIC BOOSTER CORPORATION (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original	and one (1) copy of the Artic	les of Incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate OPY REQUIRED
FROM:	Isabel Almeida, President, Blue Dol	phin Music Booster Corporatio	n
	P.O. Box 22-8182	dress	_
	Miami, Florida 33	222 tate & Zip	_
	(786) 201-3229 Daytime Tele	ephone number	_
•	ialmeida@dade	schools.net	

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

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

BLUE DOLPHIN MUSIC BOOSTER CORPORATION

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I

ARTICLE II	PRINCIPAL OFFICE Principal street address		Mailing address, if different is:
	9701 Costa del Sol Boulevard	·	P.O. Box 22-8182
	Doral, Florida 33178		Miami, Florida 33222
ARTICLE III	PURPOSE		
The purpose for w	which the corporation is organized is:		
To the extent	permitted by law, the Corporation is	s organized for	one or more of the following
	aritable or educational purposes.		100 m
ARTICLE IV	MANNER OF ELECTION The manner	in which the director	rs are elected and appointed:
	for in the Corporation's By-Laws		19.72 9
ARTICLE V	initial OFFICERS AND/OR DIRECT itle: Isabel Almeida, President 9890 N.W. 28th Terrace	rors	# 3
Name and T	itle: Isabel Almeida, President	Name and Title	e: <u>Monica Berardinelli, Secretary 🗘 ഗ</u> ൂ
Address:	9890 N.W. 28th Terrace	Address:	
	Doral, Florida 33172	 -	Doral, Florida 33178
Name and T	itle:Maria Atassi, Vice President	Name and Title	o;
Address:	5270 N.W. 106th Court		
	Doral, Florida 33178		
Name and T	itle: Claudia Ocampo, Treasurer	Name and Title	·
Address:	5652 N.W. 101st Court	Address:	
	Doral, Florida 33178		
			
	REGISTERED AGENT		
	orida street address (P.O. Box NOT acceptable)	of the registered age	ent is:
Name: Address:	Monica Berardinelli		
Address:	9701 Costa del Sol Boulevard Doral, Florida 33178		
	Doial, Fiorida 33176		
RTICLE VII	INCORPORATOR		
he <u>name and add</u> Name:	dress of the Incorporator is: Isabel Almeida	•	
Address: .	9890 N.W. 28th Terrace		
	Doral, Florida 33172		
			
laving been nam ertificate, I am fa	ed as registered agent to accept service of promittar with and accept the appointment as regis	ocess for the above tered agent and agre	stated corporation at the place designated in the te to act in this capacity
F			October 19, 2010
	Required Signature of Registered Agent	t	Date
			nat any false information submitted in a docume
) the Department	of State constitutes athird degree felony as pro-	vided for in s.817.15.	5, F.S.
	Direct ////		October 10, 2010

Date

Required Signature of Incorporator