N/5000004790

(Re	questor's Name)			
(Ad	dress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone #/)		
PICK-UP	WAIT	MAIL		
(Bu	isiness Entity Name)			
(Document Number)				
Certified Copies	_ Certificates of	Status		
Special Instructions to	Filing Officer:			
	•			





800272684678

05/08/15--01017---003 **70.00

15 MAY - 8 - PA 3: 36

2 05/13/15

COVER LETTER

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

SUBJECT: Songs for Se	niors, Inc.		
	(PROPOSED CORP	ORATE NAME - MUST INC	CLUDE SUFFIX)
,			
Enclosed is an original a	and one (1) copy of the Art	ticles of Incorporation and	a check for:
■ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
		· · · · · · · · · · · · · · · · · · ·	•
FROM:	Kevin McLean		
i Kowi.	Name (Printed or typed)		
	900 W. Platt St., Suite 200		
		Address	-
	Tampa, FL 33606		
	City, State & Zip		-
	813-505-3340		
	Dayti	me Telephone number	-
	kmclean56@gmail.com		
Ī	E-mail address: (to be used for	future annual report notificatio	n)

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

ARTICLES OF INCORPORATION

• In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE II	PRINCIPAL OFFICE		
900 \	Principal <u>street</u> address: W. Platt St	Mailing address, if differen	nt is:
Tamı	pa, FL 33606		
The purpose for	PURPOSE or which the corporation is organized is:	provide music to the elderly and those with demen	
ARTICLE IV	MANNER OF ELECTION The manner	er in which the directors are elected and appointed:	Majority vote of curre
ARTICLE IV ARTICLE V Name and Title	INITIAL OFFICERS AND/OR DIRECT		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	ORS Name and Title:	01YISIOH OF C
ARTICLE V Name and Title	INITIAL OFFICERS AND/OR DIRECT Kevin McLean, President and Treasurer e:	ORS Name and Title:	01VISION OF CORPE 15 MAY -8 PM
ARTICLE V Name and Title Address	INITIAL OFFICERS AND/OR DIRECT E. Kevin McLean, President and Treasurer 900 W. Platt St Tampa, FL 33606	ORS Name and Title:	01VISION OF CORPORATION 15 MAY -8 PM 3: 36
ARTICLE V Name and Title Address Name and Title	EKevin McLean, President and Treasurer 900 W. Platt St Tampa, FL 33606	ORS Name and Title: Address: Name and Title: Address:	01VISION OF CORPORATION 15 MAY -8 PM 3: 36
ARTICLE V Name and Title Address	**INITIAL OFFICERS AND/OR DIRECT **EXECUTE: McLean, President and Treasurer et al. (2000) **Platt St Tampa, FL 33606 **EXECUTE: McLean, President and Treasurer et al. (2000) **EXECUTE: M	ORS Name and Title: Address: Name and Title: Address:	15 MAY -8 PM 3: 36
ARTICLE V Name and Title Address Name and Title Address	INITIAL OFFICERS AND/OR DIRECT E. Kevin McLean, President and Treasurer 900 W. Platt St Tampa, FL 33606	ORS Name and Title: Address: Name and Title: Address:	15 MAY -8 PM 3: 36

** · · · · · · · · · · · · · · · · · ·			
Name and Title:_		Name and Title:	
Address _			
_			
~~			
N. 100'd		Name and Title:	
		Name and Title:	
Address _			
-			
_			
(DOLOLD LA	DOCKSTOPED ACTIVE		
	<i>REGISTERED AGENT</i> orida street address (P.O. Box NOT acce	eptable) of the registered agent is:	m
Name:	Kevin McLean	,	SEIVIS
Address:	900 W. Platt St, Suite	200	ECRET SION O
	Tampa, FL 33606		F CO
			유 유유 사
	INCORPORATOR dress of the Incorporator is:		3: 36
Name:	Kevin McLean		on 🚁
Address:	900 W. Platt St		
. 144. 656.	Tampa, FL 33606		
ARTICLE VIII	EFFECTIVE DATE:		
Effective date, if (If an effective d after the filing.)	other than the date of filing:ate is listed, the date must be specific as	. (OPTIONAL) nd cannot be more than five business days prior or 90 bu	siness days
	inserted in this block does not meet the apive date on the Department of State's reco	pplicable statutory filing requirements, this date will not be lords.	isted as the
		of process for the above stated corporation at the place do as registered agent and agree to act in this capacity	esignated in this
/	Required Signature of Registered	5/5/15	
	Required Signature of Registered	I Agent Date	
	ment and affirm that the facts stated here of State constitutes a third degree felony	ein are true. I am aware that any false information submitte as provided for in s.817.155. F.S.	d in a document
·	and the same of		
/	Required Signature of Incor	rporator Date	