N1500006232

(Re	questor's Name)	
(Ad	dress)	_
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
	_	
Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE VALLANASSEE, FLORIDA

2015 JUN 19 PM 1:

JUN 2 5 2015

COVER LETTER

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

ARIOLE MUSIC SCHOOL, INC.

MIAMI, FL 33161

kettej68@gmail.com

7863570014

	(I KOI OSED COKI	JANE HAME - MOSTAN	COOPERATION
nclosed is an original a	and one (1) copy of the Art	icles 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:	ARIOLE JOSEPH	ne (Printed or typed)	-
	12495 NE 8 AVENUE	Address	_

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

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

City, State & Zip

Daytime Telephone number

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

The name of the	e corporation snan be:	·	P (// · / /
ARTICLE II	PRINCIPAL OFFICE		**4/	LANIAD
12495	Principal <u>street</u> address: 5 NE 8 AVENUE		Mailing address, if different is:	SECRETARY OF S
MIAN	MI, FL 33161			
	PURPOSE r which the corporation is organized surpose for which the organization is		Dade on the Entertainment Map, incorpo	rate or combine
students in thei	ir major careers, networking with oth	her interested parties toge	ther. We are committed to promote Mia	mi-Dade business
and communiti	es to attract tourism. The Miami-De	ade County is a tourist de	stination, which includes four principals	: Miami Seaquariv
Metro Zoo, Ho	tels and Cruise ships. A public com	pany branched into inves	tment, Educational and Specials Events	Promotions
			As regul	ated by the by lau
IRTICLE V	MANNER OF ELECTION The INITIAL OFFICERS AND/OR D. Ariole Joseph, Founder	IRECTORS	Ruhen I griviere	ated by the by law
ARTICLE IV ARTICLE V Name and Title	INITIAL OFFICERS AND/OR DA	·	Ruben Lariviere	ated by the by law
ARTICLE V Name and Title	: Ariole Joseph, Founder : 12495 NE 8 Avenue	IRECTORS	Ruben Lariviere 14325 NW 3 Avenue	ated by the by law
ARTICLE V Name and Title	INITIAL OFFICERS AND/OR DA	IRECTORS Name and Title	Ruben Lariviere	ated by the by law
Name and Title	Ariole Joseph, Founder 12495 NE 8 Avenue Miami, FL 33161	IRECTORS Name and Title: Address:	Ruben Lariviere 14325 NW 3 Avenue Miami, FL 33168	ated by the by law
Name and Title Address	Ariole Joseph, Founder 12495 NE 8 Avenue Miami, FL 33161	IRECTORS Name and Title: Address: Name and Title:	Ruben Lariviere 14325 NW 3 Avenue Miami, FL 33168	ated by the by law
ARTICLE V Name and Title Address Name and Title	Ariole Joseph, Founder 12495 NE 8 Avenue Miami, FL 33161 Kettely Joseph, Secretary	IRECTORS Name and Title: Address:	Ruben Lariviere 14325 NW 3 Avenue Miami, FL 33168 Jean Joseph, Board Member	ated by the by law
ARTICLE V Name and Title Address Name and Title	Ariole Joseph, Founder 12495 NE 8 Avenue Miami, FL 33161 Kettely Joseph, Secretary 14325 NW 3 Avenue Miami, FL 33168	IRECTORS Name and Title: Address: Name and Title:	Ruben Lariviere 14325 NW 3 Avenue Miami, FL 33168 Jean Joseph, Board Member 12495 NE 8 Avenue	ated by the by law
Name and Title Address Name and Title Address	Ariole Joseph, Founder 12495 NE 8 Avenue Miami, FL 33161 Kettely Joseph, Secretary 14325 NW 3 Avenue Miami, FL 33168	IRECTORS Name and Title: Address: Name and Title: Address:	Ruben Lariviere 14325 NW 3 Avenue Miami, FL 33168 Jean Joseph, Board Member 12495 NE 8 Avenue Miami, FL 33161	ated by the by law

Name and Title	:	Name and Title:			-
Address		Address:		r. 1	•
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Name and Title		Name and Title:			-
Address		Address:		<u> </u>	
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ARTICLE VI	REGISTERED AGENT		* * *.	•	•
The <u>name and</u>	Florida street address (P.O. Box NOT ac	ceptable) of the registere	ed agent is:		
Name:	Kettely Joseph				
Address:	14325 NW 3 Avenue	·	•		
	Miami, FL 33168				
	, ,				
ARTICLE VII	INCORPORATOR address of the Incorporator is:				
	Ariole Joseph			,	
Name:	12495 NE 8 Avenue				-
Address:	Miami, FL 33161				•
	Miaili, FL 33101			•	•
ARTICLE VIII	EFFECTIVE DATE:		. (OPTIONAL)	,	
	if other than the date of filing:		- '	days prior or 90	business days
after the filing	.)				
	te inserted in this block does not meet the ective date on the Department of State's re		ng requirements,	this date will not	be listed as the
Having been n ceriffQate, I an	amed as registered agent to accept service familiar with and accept the appointmen	ce of process for the ab I as registered agent an	ove stated corpo d agree to act in t	ration at the plac his capacity	e designated in this
Wed St.		•	06/04/2015		5
Required Signature of Registered Agent		ed Agent	-	Date	
	cument and affirm that the facts stated hi of t of State constitutes a third degree felor			information subn	ultted in a document
1	The state commences a min a negrot jetor	,,, pro remongor 116 010		06/04/20	15
	Required Signature of Inc	orporator	-	- Dat	