

N23000011516

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

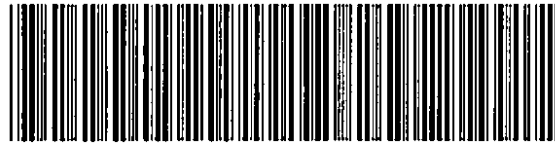
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COVER LETTER

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

SUBJECT: Ray's Music Academy, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles 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 COPY REQUIRED

FROM: Glenda Ray
Name (Printed or typed)

515 Poston Road
Address

Quincy, FL 32352
City, State & Zip

(850) 743-7782
Daytime Telephone number

glendaray5@gmail.com
E-mail address: (to be used for future annual report notification)

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 I NAME

The name of the corporation shall be: Ray's Music Academy, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

209 West Washington St
Quincy, FL 32351

Mailing address, if different is:

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: providing musical education
in general

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: _____

APPOINTED

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Glenda Ray, CEO Name and Title: _____

Address: 515 Poston Road Address: _____

Quincy, FL 32352

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address _____

Name and Title: _____ Name and Title: _____

Address _____ Address _____

ARTICLE VI REGISTERED AGENT

Name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Glenda Ray

Address: 515 Poston Road

Quincy, FL 32352

ARTICLE VII INCORPORATOR

Name and address of the Incorporator is:

Name: Glenda Ray

Address: 515 Poston Road

Quincy, FL 32352

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

leg: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

I have been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate. I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Glenda Ray
Required Signature of Registered Agent

9-25-2023
Date

I hereby sign this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Glenda Ray
Required Signature of Incorporator

9-25-2023
Date

2023-09-25 11:31