

N99000002587

Alexander C. Grieco
(Requestor's Name)

1654 Atkamine Dr
(Address)

Tallahassee, FL 32304 (850) 524-0435
(City, State, Zip) (Phone #)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Capital City Kingmen, INC.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☐ Pick up time _____

☐ Certified Copy

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certificate of Status

99 APR 27 PM 4:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

will wait

| NEW FILINGS | |
|-------------------------------------|-------------------|
| <input type="checkbox"/> | Profit |
| <input checked="" type="checkbox"/> | NonProfit |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication |
| <input type="checkbox"/> | Other |

| AMENDMENTS | |
|--------------------------|---------------------------------------|
| <input type="checkbox"/> | Amendment |
| <input type="checkbox"/> | Resignation of R.A., Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent |
| <input type="checkbox"/> | Dissolution/Withdrawal |
| <input type="checkbox"/> | Merger |

| OTHER FILINGS | |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report |
| <input type="checkbox"/> | Fictitious Name |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/ QUALIFICATION | |
|--------------------------------|---------------------|
| <input type="checkbox"/> | Foreign |
| <input type="checkbox"/> | Limited Partnership |
| <input type="checkbox"/> | Reinstatement |
| <input type="checkbox"/> | Trademark |
| <input type="checkbox"/> | Other |

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*****78.75 *****78.75

Examiner's Initials

Dmc 4/27/99

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

Capital City Kingsmen, INC.

ARTICLE II PRINCIPAL OFFICE

1654 Atkamire Dr.
Tallahassee, FL 32304

ARTICLE III PURPOSE

To provide experience in the percussive arts through competitive performance. Activities stress leadership, development of a strong work ethic, and commitment to excellence in percussive arts performance.

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

Directors shall be elected by the organizations active staff members.

ARTICLE V REGISTERED AGENT

Alexander Carmine Grieco
1654 Atkamire Dr.
Tallahassee, FL 32304

ARTICLE VI INCORPORATOR

Alexander Carmine Grieco
1654 Atkamire Dr.
Tallahassee, FL 32304

Shannon Allan Stovall
1654 Atkamire Dr.
Tallahassee, FL 32304



Shannon Stovall/Incorporator

4/27/99

Date

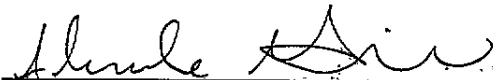


Alexander Grieco/Incorporator

4-27-99

Date

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



Alexander Grieco/Registered Agent

4-27-99

Date