

P04000017218

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400027003974

FILED
RECEIVED
04 JAN 23 PM 12:52
04 JAN 23 PM 1:06
SECRETARY OF STATE
DIVISION OF REGISTRATION
TALLAHASSEE, FLORIDA

/s



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 407871 7357965

AUTHORIZATION :

Patricia Pajoto

COST LIMIT : \$ 70.00

ORDER DATE : January 23, 2004

ORDER TIME : 11:23 AM

ORDER NO. : 407871-005

CUSTOMER NO: 7357965

CUSTOMER: Mr. Joe Joseph
Joseph M. Joseph Associates,
Inc.
6820 St. Augustine Road
Jacksonville, FL 32217

04 JAN 23 PM 12:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

DOMESTIC FILING

NAME: VINYLOCITY, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP
 ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - EXT. 2955

EXAMINER'S INITIALS: _____

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

VINYLOCITY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6820 ST AUGUSTINE ROAD
JACKSONVILLE, FL 32217

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY LAWFUL PURPOSE PERMITTED BY THE LAWS OF THE STATE OF FLORIDA.

ARTICLE IV SHARES

The number of shares of stock is:

ONE HUNDRED

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

KARL SCHNABEL
6326 WANDERING TRAIL
JACKSONVILLE, FL 32219

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

J.M. JOSEPH
6820 ST AUGUSTINE ROAD
JACKSONVILLE, FL 32217

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

J.M. JOSEPH
6820 ST AUGUSTINE ROAD
JACKSONVILLE, FL 32217

Having 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

Signature/Registered Agent

Date

Signature/Incorporator

Date

FILED
04 JAN 23 PM 12:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA