

PO 4002120371

(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



900039614239

08/19/04--01063--002 \*\*78.75

RECEIVED  
04 AUG 19 AM 11:24  
DIVISION OF REGISTRATION

FILED  
2004 AUG 19 P 1:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

OFFICE USE ONLY(DOCUMENT #)

**LAZARUS CORPORATE FILING SERVICE**

**3320 S.W. 87 AVENUE**

**MIAMI, FLORIDA (305)552-5973**

OFFICE USE ONLY

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

1. ALIVE MUSIC INC

(Corporation Name)

(Document #)

2.

(Corporation Name)

(Document #)

3.

(Corporation Name)

(Document #)

4.

(Corporation Name)

(Document #)

☒ Walk in

☒ Pick up time

2.00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input 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

STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

04 AUG 19 AM 10:27

RECEIVED

Examiner's Initials

FILED

2008 AUG 19 PM 1:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLES OF INCORPORATION

The undersigned incorporator(s) for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt (s) the following Articles of Incorporation

### ARTICLE I NAME

The name of the corporation shall be :

ALIVE MUSIC INC

---

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

9920 SW 88 STREET APT J401

---

MIAMI, FL 33176

---

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 Shares @ \$1.00 per value

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

DANIEL ACOSTA SUAREZ  
9920 SW 88 STREET APT J401  
MIAMI, FL 33176

**ARTICLE V INCORPORATOR (S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

DANIEL ACOSTA SUAREZ  
9920 SW 88 STREET APT J401  
MIAMI, FL 33176  
(786)286 0018

President / Secretary

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this day of 20

  
Signature

CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/ REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES,  
THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE  
OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE  
REGISTERED OFFICE. REGISTERED AGENT, IN THE STATE OF FLORIDA

1 The name of the corporation is **ALIVE MUSIC INC**

**9920 SW 88 STREET APT J401  
MIAMI, FL 33176**

2 The name and address of the registered agent and office is:

**DANIEL ACOSTA SUAREZ**

name

**9920 SW 88 STREET APT J401**

(P.O. Box or Mail Drop NOT acceptable)

**MIAMI, FL 33176**

(City/State/Zip)

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.

  
(signature)

**8/18/04**  
(date)

FILED  
2004 AUG 19 P 1:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA