# P05000074726

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
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SECRETARY OF STATE
TALL ARE SEE FLOOR

T. G. W. C. W. N. N. 12 4 2005

### TRANSMITTAL LETTER

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

	(PROPOSED CORPORATE NAME - MUSIC NICEUD AND ISEX)					
osed is an original a	and one(1) copy of the arti	cles of incorporation and a	check for:			

FROM: WILLIAM M. CHANDLER

Name (Printed or typed)

228 CHURCHILL DR.

Address

LONGWODD, FL. 32779

City. State & Zip

407-869-7880

Daytime Telephone number

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



May 12, 2005

WILLIAM M CHANDLER 228 CHURCHILL DR LONGWOOD, FL 32779

SUBJECT: BIG LICK INVESTMENTS INC.

Ref. Number: W05000024200

We have received your document for BIG LICK INVESTMENTS INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch
Document Specialist
New Filings Section

Letter Number: 705A00034306

## ARTICLES OF INCORPORATION OF

#### BIG LICK INVESTMENTS INC.

#### **ARTICLE 1 NAME**

THE NAME OF THE CORPORATION SHALL BE: BIG LICK INVESTMENTS INC..

THE PRINCIPAL PLACE OF BUSINESS OF THIS CORPORATION SHALL BE 228 CHURCHILL DRIVR, LONGWOOD FLORIDA 32779
ARTICLE 11 NATURE OF BUSINESS

THE CORPORATION MAY ENGAGE IN OR TRANSACT ANY AND ALL LAWFUL ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES, THE STATE OF FLORIDA,OR ANY OTHER STATE,COUNTRY,TERRITORY OR NATION.

#### ARTICLE 111 CAPITAL STOCK

THE AGGREGATE NUMBER OF SHARES OF STOCK AND ITS PAR VALUE THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

500 SHARES AT \$ 1.00 EACH.

ARTICLE 1V TERM OF EXISTENCE

THE CORPORATION IS TO EXIST PERPETUALLY.

ARTICLE V OFFICERS DIRECTORS

THE NAME (S) AND STREET ADDRESS(ES) OF THE INITIAL OFFICER(S) AND DIRECTOR(S), IF ANY, WHO SHALL HOLD OFFICE THE FIRST YEAR OF THE CORPORATION'S EXISTENCE OR UNTIL THEIR SUCCESSOR(S) IS(ARE)ELECTED, IS(ARE):

WILLIAM M. CHANDLER 228 CHURCHILL DRIVE LONGWOOD,FLORIDA,32779 OS MAY 23 AM 8: 41
SECRETARY OF SIAL
TALLAHASSEE, FLORIG

#### ARTICLE VI INCORPORATORS

THE NAME (S) AND STREET ADDRESS(ES) OF THE INCORPORATOR(S) TO THIS ARTICLES OF INCORPORATION IS(ARE):

WILLIAM M. CHANDLER 228 CHURCHILL DRIVE

LONGWOOD FLORIDA 32779 IN WITNESS WHEREOF, THE UNDERSIGNED INCORPORATOR(S) HAS (HAVE)EXECUTED THESE ARTICLES OF INCORPORATION THIS 28TH DAY OF APRIL ,2005 SIGNATURE(S) OF INCORPORATOR(S) STATE OF FLORIDA, COUNTY OF SEMINOLE. THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED AND SWORN TO BEFORE ME THIS \_\_28TH \_\_\_ DAY OF APRIL \_\_\_ 2005, BY WILLIAM M. CHANDLER (NAME OF INCORPORATOR). OF BIG LICK INVESTMENTS INC. (NAME OF CORPORATION). NOTARY PUBLIC

Y COMMISSION EXPIRES

#### CERTIFICATE DESIGNATING REGISTERED

#### AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.325, 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: BIG LICK INVESTMENTS INC.

2.THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

WILLIAM M. CHANDLER 228 CHRUCHILL DRIVE LONGWOOD FLORIDA 32779

SIGNATURE WELLEAM Mc Chandles CORPORATE OFFICER

TITLE	PRESIDENT		
DATE	APRIL 28TH 2005		

HAVING BEEN NAMED TO ACCEPTS SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF AL; STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE Welliam M. Chandler REGISTERED AGENT

DATE APRIL 28TH,2005\_\_\_\_\_