

P060000021999

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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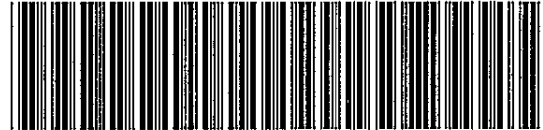
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: VERSATILE MUSIC, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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 of
Status
ADDITIONAL COPY REQUIRED

FROM: BERNARD KOPET P.A.
Name (Printed or typed)

20170 PINES BLVD - SUITE # 302
Address

PEMBROKE PINES, FL 33029
City, State & Zip

(954) 441-0403
Daytime Telephone number

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

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:

VERSATILE MUSIC, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2900 NW 56th AVENUE - APT #D
LAUDERHILL, FL 33313

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE PURPOSE IS RECORD LABEL

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES @\$1.00 PAR VALUE PER SHARE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

PRESIDENT

TIM WILLIAMS

2900 N.W. 56th AVENUE

LAUDERHILL, FL 33313

ARTICLE VI REGISTERED AGENT

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

TIM WILLIAMS

2900 N.W. 56th AVENUE

LAUDERHILL, FL 33313

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

BERNARD KOPET P.A.

20170 PINES BLVD - SUITE #302

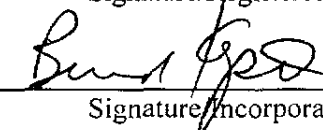
PEMBROKE PINES, FL 33029

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:

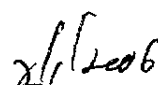


Signature/Registered Agent

Date



Signature/Incorporator



Date

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SECRETARY OF STATE
TALLAHASSEE FLORIDA