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(Requestor's Name)			
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(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
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Certified Copies Certificates of Status			
Special Instructions to f	Filing Officer:		
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FILED

07 OCT -2 AM 9: 4SECRETARY OF STATE
TALL SHY EF FLOOR



COVER LETTER

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

SUBJECT: St	OTLIGHT MUS. (PROPOSED CORPORA	ic GROUP,	INC
	(PRŌPŌSED CORPORA	TE NAME <u>MUST INCL</u>	<u>ŪDE SUFFIX</u>)
Fuelessed on an exis	Such and one (I) come of the sub-		I a alacada Carr
Enclosed are an orig	ginal and one (1) copy of the arti	icles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	24/NW	Monnis (Printed or typed) HISTHEET Address	
	BMPANO &	BGACH, FL	33064
	(954) 78 Daytime 7	5-078Z	

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME The name of the corporation shall be: SAOTLIGHT MUSIC GROUP, INC	FILED 07 OCT -2 A
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 24/NW 4/STREET HOMPAND SEALH, FL 33°64	9: 4- FLORIDA
ARTICLE III PURPOSE The purpose for which the corporation is organized is: DISTAIBUTORS OF RECORDS, CDS AND DV	IDS
ARTICLE IV SHARES The number of shares of stock is: WHILH THE CON PRATION AUTHORITY TO ISSUE IS 30,000 SHARES FACH OF HAVE NO HAN VALUE AND ALL THE WHILH SHALL BE ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS CLASSIFICAT List name(s), address(es) and specific title(s): PATRICK V MORNIS - PRESIDENT & CEO 241NOW 41STREET, FOMBANO BEACH FL 33-664 CONSTANTINE MARTIN - VICE PRESIDENT 241NOW 4NSTREET, PAMPANO BEACH 241NOW 4NSTREET, PAMPANO BEACH	SHAIL HAVE E GAHILH SHA. OF ONE
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:	
LEONARD ANDERSON 24/NUE 4/STRET FOMPOND BEACH I-C 33064 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: ATLICK V MONIS 24/NUE 4/STREET Bonfano Beach FC 33064 ***********************************	*****
Having been named as registered agent to accept service of process for the above stated corporation at the p certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	place designated in this
Signature/Registered Agent Dat	0) te 03-57

Signature/Incorporator