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## **COVER LETTER**

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

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# SUBJECT: Jay Blues Band Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$78.75 Filing Fee & Certificate of Status	<ul> <li>\$78.75</li> <li>Filing Fee &amp; Certified Copy</li> <li>ADDITIONAL CO</li> </ul>	<ul> <li>\$87.50</li> <li>Filing Fee,</li> <li>Certified Copy</li> <li>&amp; Certificate of</li> <li>Status</li> <li>PY REQUIRED</li> </ul>
		<u> </u>
Sunrise F City, (954) S Daytime To	Lovidu 333 State & Zip S21-9705 Elephone number	
	Filing Fee & Certificate of Status <u>Jerome wa</u> Name <u>9268 NW</u> <u>A</u> Sunrise F City, (954) S Daytime Te	Filing Fee Filing Fee

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: Jay BLUES BAND. Inc.

#### ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

9268 NW 49th Place.

Sunrise FL 33351

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To PerForm Music as A BAND.

#### ARTICLE IV SHARES

The number of shares of stock is:  $O \cap \mathcal{E}$ 

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Director Jerome WAShington 9268 NW 49th Place, Sunnise, FL 33351

#### ARTICLE VI REGISTERED AGENT

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

Jeime WAShingtan 9268 NW 49th Place Sunnise, FL 33351

# ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JEROME WAShington 9268 NW 49th Place Sunvise, FL 33351

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 ignature/Incorporator

Date



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SECRETARY OF STATE TALLAHASSEE. FLORIDA