

P10000101684

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

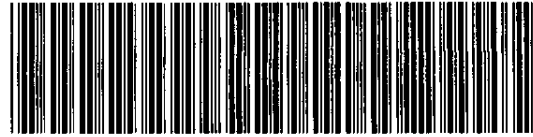
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400188708464

12/16/10--01010--018 \*\*87.50

J. Shivers DEC 17 2010

## COVER LETTER

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

SUBJECT: Mackel Records, 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: Gayla F. James

Name (Printed or typed)

3357 Cypress Legends Circle, #1426

Address

Fort Myers, FL 33905

City, State & Zip

239-265-8838

Daytime Telephone number

mackeljames@comcast.net

E-mail address: (to be used for future annual report notification)

**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: Mackel Records, Inc.

**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address  
3357 Cypress Legends Circle  
#1426  
Fort Myers, FL 33905

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To minister to the broken hearted and the heavy burdened thru song.

**ARTICLE IV SHARES**

The number of shares of stock is: 1,500

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Gayla E. James, President  
Address: 3357 Cypress Legends Circle  
#1426  
Fort Myers, FL 33905Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_Name and Title: Mack A. James Jr, Vice-President  
Address: 3357 Cypress Legends Circle  
#1426  
Fort Myers, FL 33905Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_Name and Title: Angela A. James, Treasure  
Address: 11535 Lincoln Blvd  
Miami, FL 33176Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_**ARTICLE VI REGISTERED AGENT**

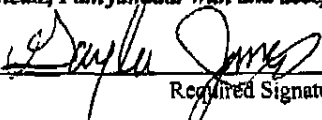
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Gayla James  
Address: 3357 Cypress Legends Circle Apt 1426  
Fort Myers, FL 33905**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Angela A. James  
Address: 11535 Lincoln Blvd  
Miami, FL 33176Article VIII  
Effective Date Jan. 1, 2011

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

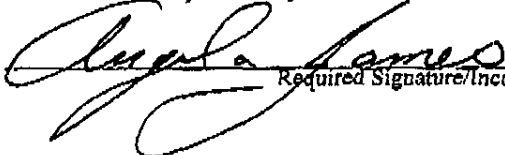


Required Signature/Registered Agent

12-19-10

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in §817.155, F.S.



Required Signature/Incorporator

December 3, 2010  
Date