## P13000031122

(Requestor's Name)
(Address)
(Address)
<b>(</b> , ,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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T. Buren APR 5 2013.

## **COVER LETTER**

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

SUBJECT:	MUSIC TO THE !	EYE INC. ATENAME- <u>MUSTINCL</u>	ÜDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PY REQUIRED

FROM:	WALTER C. WILSON Name (Printed or typed)
-	5200 N. Ocean Blvd. 4/2/4
-	Cauderdale by the Sea, FL 33308
-	954 - 205 - 8301 Daytime Telephone number
-	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)

	oration shall be: MUSIC TO		<u> </u>	
TICLE II P.	RINCIPAL OFFICE Principal street address	Mailing addre	Mailing address, if different is:	
200 N.	Ocean Blud. #1214			
	le by the Sea, FL.			
	33366			
ricle III Pi	TRPOSE the the corporation is organized is:	sea Production	F Port Promi	
purpose for which	in the corporation is organized is:	AS LLOGOCIAN	1 1021 LKDIV	
		******		
		• "	*	
		-	70 7	
rici e iu e	HADEC			
number of shares	HARES of stock is: /000			
TICLE V II	NITIAL OFFICERS AND/OR DIRECTO	nes	<u> </u>	
	ide: WALTER WILSON, PRESIDE			
Address	5200 N. Ocean Blud. #12			
	Lauderdale by the Sea, F	•		
	33308			
		<del></del>		
	0			
Name and Ti	ile PAMELA S. WILSON, Secreta	Name and Title:		
Name and Ti Address	5200 N. Ocean Bhd.	1214Address:		
	5200 N. Ocean Blod. Lauderdole by the Sea	1214Address:		
	5200 N. Ocean Bhd.	1814Address:		
Address	5200 N. Ocean Blod. Lauderdole by the Sea	1214Address:		

Name and	d Title:	_ Name and Title:	
Address		Address:	
ARTICLE VI The name and F1	<b>REGISTERED AGENT</b> orida street address (P.O. Box NOT acceptable) o	of the registered agent is:	
Name:	WALTER G WILSON	<del></del>	
Address:	5200 N. Ocean Blod. #12,	4	G APR
	Lauderable by the Sea, FL	- 30 <i>8</i>	1
ARTICLE VII	INCORPORATOR		PH &
The name and ad	Idress of the Incorporator is:		÷ 5
Name:	WALTER C. WILSON		
Address;	5200 N. Ocean 3/10. #121	4	
	lauderdale by the Sea, FL	_ <i>333</i> 08	
	ned as registered agent to accept service of proces am familiar with and accept the appointment as re		
	Dette C. Wilson		4/1/2013
	Required Signature/Registered Agent		/ Date
	ument and affirm that the facts stated herein are Department of State constitutes a third degree felor Walte C Lelson		
	Required Signature/Incorporator		/ Date