

P14000072225

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08/14/14--01023--013 **78.75

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14 AUG 28 PM 1:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8/29/14

COVER LETTER

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

SUBJECT: Arpeggio Fine Arts Studio, 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: Ariadna Barbe-Villa
Name (Printed or typed)
1230 SW 131st Place Circle West
Address
Miami, Florida 33184
City, State & Zip
305-807-8576
Daytime Telephone number
Aribv17@aol.com
E-mail address: (to be used for future annual report notification)

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 AUG 28 PM 1:11

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 19, 2014

ARIADNA BARBE-VILLA
1230 SW 131ST PLACE CIRCLE WEST
MIAMI, FL 33184

SUBJECT: ARPEGGIO FINE ARTS STUDIO, INC.
Ref. Number: W14000050828

We have received your document for ARPEGGIO FINE ARTS STUDIO, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 914A00017841

RECEIVED
14 AUG 28 AM 11:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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14 AUG 28 PM 1:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Arpeggio Fine Arts Studio, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

1230 SW 131st Place Circle West

Miami, Florida 33184

Mailing address, if different is:

1230 SW 131st Place Circle West

Miami, Florida 33184

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Music Studio

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ariadna Barbe-Villa, President

Address

1230 SW 131st Place Circle West

Miami, Florida 33184

Name and Title: _____

Address: _____

Name and Title: _____

Address

Name and Title: _____

Address: _____

Name and Title: _____

Address

Name and Title: _____

Address: _____

(cont.)

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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


Name: Ariadna Barbe-Villa
Address: 1230 SW 131st Place Circle West
Miami, Florida 33184

ARTICLE VII INCORPORATOR

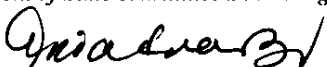
The name and address of the Incorporator is:

Name: Ariadna Barbe-Villa
Address: 1230 SW 131st Place Circle West
Miami, Florida 33184

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

 8/26/14
Required Signature/Registered Agent 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 s.817.155, F.S.

 8/26/14
Required Signature/Incorporator Date

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TALLAHASSEE, FLORIDA