

P15000041795

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

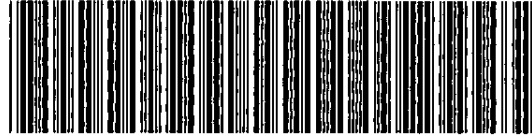
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/05/15--01028--015 **70.00

15 MAY -5 PM 1:52
STATE
ATTORNEY GENERAL
TALLAHASSEE, FLORIDA

MD-5/11

COVER LETTER

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

SUBJECT: C. Sharp Music, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Chris Sharp

Name (Printed or typed)

1041 NE 20th Ave.

Address

Gainesville, FL 32609

City, State & Zip

321-217-7234

Daytime Telephone number

csharpmusic@att.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 C. Sharp Music, Inc.
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
Principal street address _____

1041 NE 20th Ave.

Gainesville, FL 32609

Mailing address, if different is: _____

ARTICLE III PURPOSE Sales of printed music, method books, commissioned music, and music
The purpose for which the corporation is organized is: _____

services.

ARTICLE IV SHARES 1000
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Chris Sharp, (P., V., T., S., D.)

Name and Title: _____

Address 1041 NE 20th Ave.

Address: _____

Gainesville, FL 32609

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: Chris Sharp _____

Address: 1041 NE 20th Ave. _____

Gainesville, FL 32609 _____

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Chris Sharp _____

Address: 1041 NE 20th Ave. _____

Gainesville, FL 32609 _____

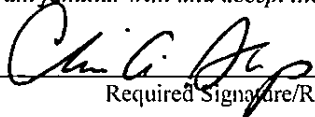
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: May 1, 2015 _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

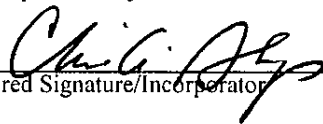


Required Signature/Registered Agent

May 2, 2015

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.



Required Signature/Incorporator

May 2, 2015

Date

15 MAY -5 PM 1:52
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 05/01/00 BY 60322