

P15 000047690

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

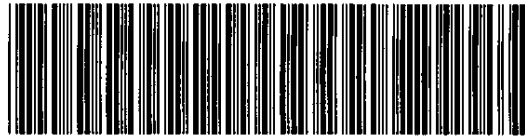
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500270514115

03/16/15--01048--003 **87.50

FILED

2015 MAY 28 AM 11:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W15 000047690
*
*
5/29cm

COVER LETTER

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

DSAPP ON THE BEAT INC.

SUBJECT: _____
(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: **DEON SAPP** _____
Name (Printed or typed)
1000 NW 14TH STREET _____
Address
FORT LAUDERDALE, FLORIDA 33311 _____
City, State & Zip
7542142518 _____
Daytime Telephone number
DSAPPONDABEATZ@GMAIL.COM _____
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 20, 2015

DEON SAPP
1000 NW 14TH STREET
FORT LAUDERDALE, FL 33311

SUBJECT: DSAPP ON THE BEAT INC
Ref. Number: W15000019915

We have received your document for DSAPP ON THE BEAT INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return 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.

Carol Mustain
Regulatory Specialist II

Letter Number: 715A00005680

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME DSAPP ON THE BEAT INC.

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1000 NW 14TH STREET

FORT LAUDERDALE, FL. 33311

ARTICLE III PURPOSE

THIS IS A MUSIC PRODUCTION COMPANY.

The purpose for which the corporation is organized is:

THAT PROVIDES MUSICAL SERVICES SUCH AS PRODUCING MUSIC, CREATING BEATS.

RECORDING VOCALS, MIXING AND MASTERING MUSIC FOR DIFFERENT ARTIST.

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

DEON SAPP/PRESIDENT

Name and Title: _____ Name and Title: _____

Address: 1000 NW 14TH STREET Address: _____

FORT LAUDERDALE, FL 33311 Address: _____

Address: _____

Address: _____

Address: _____

Address: _____

Address: _____

Address: _____

Address: _____

Address: _____

Address: _____

Address: _____

Address: _____

Address: _____

Address: _____

Address: _____

Address: _____

Address: _____

Address: _____

Address: _____

Address: _____

FILED
2015 MAY 28 AM 11:14
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

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:

DEON SAPP

Name: _____

1000 NW 14TH STREET

Address: _____

FORT LAUDERDALE, FL 33311

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DEON SAPP

Name: _____

1000 NW 14TH STREET

Address: _____

FORT LAUDERDALE, FL 33311

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

Deon Sapp

2/25/2015

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.

Deon Sapp

2/25/2015

Required Signature/Incorporator

Date