

P 17 0000 11671

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

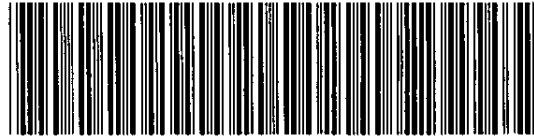
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500295150255

FILED
17 FEB -6 PM 3:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02/07/17--01003--004 **87.50

RECEIVED
17 FEB -6 PM 3:17
TO AGENT OF FILING
SUFFICIENT OF FILING

C. GOLDEN

FEB - 6 2017

COVER LETTER

FILED

17 FEB -6 PM 3:39

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: South Side music group 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: Jamal Franklin
Name (Printed or typed)

26-60 Old Bainbridge Road Apt 702
Address

Tallahassee FL 32303
City, State & Zip

(850) 322-1439
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)

FILED

ARTICLE I NAME

The name of the corporation shall be: southside music group inc.

17 FEB -6 PM 3:39

ARTICLE II PRINCIPAL OFFICE

Principal street address

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2660 Old Main bridge Road
Tallahassee FL 32303

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: we will be doing music
management and offering Record Deals

ARTICLE IV SHARES

The number of shares of stock is: 10000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jamal Franklin CEO Name and Title: _____

Address 2660 Old Main bridge Address: _____

APT 703

Tallahassee FL 32303

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

FILED

17 FEB -6 PM 3:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: Tamara Franklin

Address: 2666 Old Bainbridge Road Apt 702
Tallahassee FL 32303

ARTICLE VII INCORPORATOR

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

Name: Tamara Franklin

Address: 2666 Old Bainbridge Road Apt 702
Tallahassee FL 32303

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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

Tamara Franklin

Required Signature/Registered Agent

02-06-17

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.

Tamara Franklin

Required Signature/Incorporator

02-06-17

Date