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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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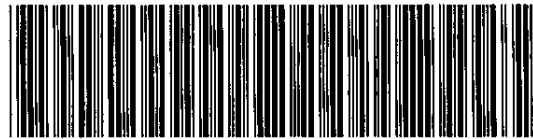
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SEC. OF STATE
FILE

M. MOON
APR 24 2017

COVER LETTER

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

SUBJECT: All In One Auds Incorporated
(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:

Daniel George

Name (Printed or typed)

5555 Kerwood Oaks Dr

Address

Miami, FL 33156

City, State & Zip

(305) 467-6717

Daytime Telephone number

dannygeorge3@gmail.com

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

The name of the corporation shall be: ALL In One Auds Incorporated

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

7900 SW 57th Ave Suite 13
Miami, FL 33143

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To help actors, musicians, and others in the
performing arts by providing training, workshops,
classes, and auditions for potentially hiring
theatres and the like.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Daniel George-Funder Name and Title:

Address 5555 Kerwood Oaks Dr. Address:
Miami, FL 33156

Name and Title: Name and Title:

Address Address:

Name and Title: Name and Title:

Address Address:

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FILED

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: Registered Agents Inc.
3030 N. Rocky Point Dr. STE 150A
Tampa FL 33607

17 APR 24 PM 1:26

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Daniel George
Address: 5555 Kerwood Oaks Dr.
Miami, FL 33156

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 days prior or 90 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

Bill Havre

Registered Agents Inc.

Bill Havre - Assistant Secret:

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.

Paul J. [Signature]
Required Signature/Incorporator

4/7/17
Date