

P19000038331

(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



200328061332

04/30/19--01009--010 **18.75

FILED
2019 APR 30 AM 8:41
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

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

SUBJECT: Soundz, 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: Peter Jensen

Name (Printed or typed)

700 Ridgewood Ave #107

Address

Holly Hill FL 32117

City, State & Zip

386-256-2200

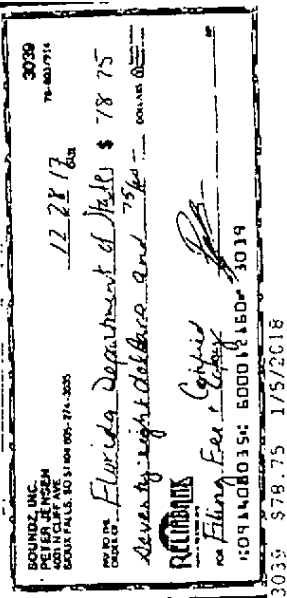
Daytime Telephone number

sue@soundzinstall.com

E-mail address: (to be used for future annual report notification)

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

We originally filed online late Dec 2017 - were told a page was missing with no signature or initial required. Sent this page along with check for \$78.75 our check was cashed 1/5/2018



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: Soundz, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

700 Ridgwood Ave #107

Holly Hill FL 32117

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

motorcycle, motorsports, car audio and accessories sales and installations and any and all lawful business

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Peter Jensen President

Name and Title:

Address: 700 Ridgwood Ave #107

Address:

Holly Hill FL 32117

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

FILED
2019 APR 30 AM 8:42
SECRETARY OF STATE
TALLAHASSEE, FL

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: Peter Jensen _____

Address: 700 Ridgewood Ave #107 _____

Holly Hill FL 32117 _____

ARTICLE VII INCORPORATOR

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

Name: Peter Jensen _____

Address: 700 Ridgewood Ave #107 _____

Holly Hill FL 32117 _____

FILED
2019 APR 30 AM 8:42
SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: April 29, 2019 _____ (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

Required Signature/Registered Agent

4/26/2019

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

4/26/2019

Date