

12/15/2020

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 Florida Department of State  
 Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : SHUMAKER, LOOP & KENDRICK LLP  
Account Number : 075500004387  
Phone : (813)229-7600  
Fax Number : (813)229-1660

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: jfeller@shumaker.com

**FLORIDA PROFIT/NON PROFIT CORPORATION**

**Coleman Marketing and Business Research, Inc.**

Certificate of Status	0
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**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: Coleman Marketing and Business Research, Inc.**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address

Mailing address, if different is:

233 N. Roscoe Blvd.  
Ponte Vedra, FL 32082**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: provide sales and marketing services and  
develop new markets in the music and entertainment industry, and any other lawful  
purpose.**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Gary B. Coleman, Jr. - Director Name and Title: Gary B. Coleman, Jr. - PresidentAddress: 233 N. Roscoe Blvd. Address: 233 N. Roscoe Blvd.  
Ponte Vedra, FL 32082 Ponte Vedra, FL 32082Name and Title: Emily L. Coleman - Director Name and Title: Gary B. Coleman, Jr. - TreasurerAddress: 233 N. Roscoe Blvd. Address: 233 N. Roscoe Blvd.  
Ponte Vedra, FL 32082 Ponte Vedra, FL 32082Name and Title: Emily L. Coleman - Secretary Name and Title: Emily L. Coleman - Vice PresidentAddress: 233 N. Roscoe Blvd. Address: 233 N. Roscoe Blvd.  
Ponte Vedra, FL 32082 Ponte Vedra, FL 32082

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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: Gary B. Coleman, Jr.  
Address: 233 N. Roscoe Blvd.  
Ponte Vedra, FL 32082

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: Bennett H. Speyer  
Address: 1000 Jackson Street  
Toledo, Ohio 43604

**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*



Required Signature/Registered Agent

12/7/20  
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

December 7, 2020  
Date