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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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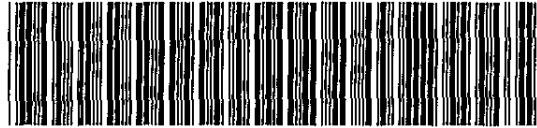
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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FILED

MAR 14 2006

406-6401

COVER LETTER

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

SUBJECT: ISLANDERS SOCCER CLUB INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

ADDITIONAL COPY REQUIRED

FROM: NICHOLE JONES
Name (Printed or typed)

6204 SPARKLING HILLS CR.
Address

ORLANDO, FL 32808
City, State & Zip

407.405.0133
Daytime Telephone number

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06 MAR 14 PM 2:32
TALLAHASSEE, FLORIDA

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

ARTICLES OF INCORPORATION
In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

ISLANDERS SOCCER CLUB INC.

FILED**Mar 14, 2006 08:00 AM****Secretary of State****ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

6204 SPARLING HILLS CR.

ORLANDO FL 32808

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE ISLANDERS SOCCER CLUB'S MISSION IS TO ASSIST IN THE PHYSICAL, MENTAL AND CHARACTER DEVELOPMENT OF EACH PLAYER THROUGH THE GAME OF SOCCER. OUR GENERAL PURPOSE IS TO ORGANIZE AND PROMOTE THE GAME OF SOCCER AT ALL LEVELS FOR THE BENEFIT OF ALL PERSONS REGARDLESS OF RACE, COLOR, CREED, RELIGION, ETHNICITY OR SEX.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

NOMINATIONS AND VOTES.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

PRESIDENT: LEROY MONDEZHE'S (1414 MALVERNE HILL DR. ORLANDO FL 32818)

VICE PRESIDENT: NICHOLE JONES (6204 SPARLING HILLS CR., ORLANDO FL 32808)

TREASURER: CHARLES WILLIAMS (1961 PARKVIEW CR., APOKA FL. 32712)

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

NICHOLE JONES

6204 SPARLING HILLS CR.

ORLANDO FL. 32808

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

NICHOLE JONES

6204 SPARLING HILLS CR.

ORLANDO, FL. 32808

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.

Nichole Jones
Signature/Registered Agent NICHOLE JONES

1/23/06
Date

Nichole Jones
Signature/Incorporator NICHOLE JONES

1/23/06
Date