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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

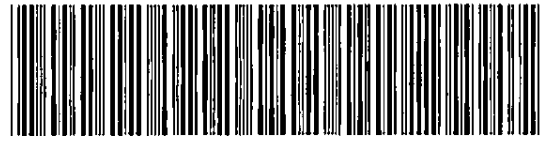
(Business Entity Name)

(Document Number)

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FEB 28 2019

COVER LETTER

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

SUBJECT: Federation Boxing Association 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: Richard A. Burns
Name (Printed or typed)

2138 S Atlanta
Address

Quincy FL 32351
City, State & Zip

850-544-6202
Daytime Telephone number

allenrb93@yahoo.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 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: Federation Boxing Association INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

2138 S Atlanta St
Quincy FL 32351

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: An Professional Boxing / MMA Title Belt Sanctioning Body, We sanction Professional Boxing / MMA Title Fights

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Directors will be elected by the President ~~or~~ CEO.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Richard A Burns (CEO)</u>	Name and Title:	<u>Mary Burns (Director)</u>
Address:	<u>2138 S Atlanta St</u> <u>Quincy FL 32351</u>	Address:	<u>2138 S Atlanta St</u> <u>Quincy FL, 32351</u>
Name and Title:	<u>Cortez Burns (President)</u>	Name and Title:	_____
Address:	<u>2138 S Atlanta St</u> <u>Quincy FL, 32351</u>	Address:	_____
Name and Title:	<u>Melkessa Burns (VP)</u>	Name and Title:	_____
Address:	<u>2138 S Atlanta St</u> <u>Quincy FL, 32351</u>	Address:	_____

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SECRETARY OF STATE
ALLAHASSEL, FLORIDA

Name and Title: _____ Name and Title: _____
 Address: _____ Address: _____

 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: Richard A Burns
 Address: 2138 S Atlanta ST
Quincy FL 32351

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Richard A. Burns
 Address: 2138 S Atlanta ST
Quincy FL 32351

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

[Signature]
 Required Signature of Registered Agent

2-28-19
 Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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.

[Signature]
 Required Signature of Incorporator

2-28-19
 Date

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 SECRETARY OF STATE
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