P05000096913

(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:

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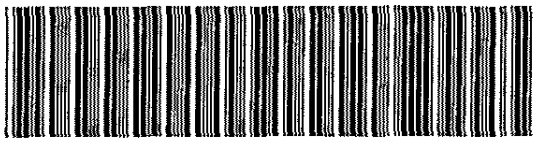

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7/11

TRANSMITTAL LETTER

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

SUBJECT: ChallengeNet, Incorporated
(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: James Travis
Name (Printed or typed)

6542 Hypoluxo Road, Suite 318
Address

Lake Worth, Florida 33467
City, State & Zip

561.742.4129
Daytime Telephone number

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

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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:

ChALLENGENET INCORPORATED

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

6542 Hypoluxo Road, Suite 318
LakeWorth, FL. 33467

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: For Christian, physical and spiritual health center specializing in the Martial Arts.

ARTICLE IV SHARES

The number of shares of stock is: ONE thousand

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JAMES TRAVIS, Pres., 6542 Hypoluxo Rd., Ste 318, LAKEWORTH, FL. 33467

MICHAEL S. ZDANOWICZ, Vice Pres., 14703 CACTUS WREN PLACE, TAMPA, FL 33625

MARLENE GALLO TRAVIS, SECRETARY/TREASURER, 6542 Hypoluxo Rd. Suite 318, LakeWorth, FL. 33467

ARTICLE VI REGISTERED AGENT

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

Michael S. Zdanowicz, 14703 CACTUS WREN PLACE, TAMPA, FL 33625

ARTICLE VII INCORPORATOR

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

JAMES TRAVIS, 6542 Hypoluxo Rd., Suite 318, LAKEWORTH, FL 33467

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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

Michael S. Zdanowicz
Signature/Registered Agent

06.27.05
Date

James Travis
Signature/Incorporator

06-27-2005
Date