

PO8000056321

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

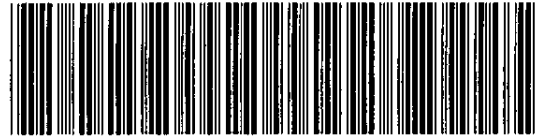
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: Florida Athletics Cheer and Dance, 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: Diana Gilroy
Name (Printed or typed)

1236 27th St. SW
Address

Naples, FL 34117
City, State & Zip

(239) 494-7560
Daytime Telephone number

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

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:

Florida Athletics Cheer and Dance, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

1236 27th St. SW
Naples, FL 34117

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Teach Cheerleading and Dance and to conduct legal or profit business.

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Diana Gilroy - Director
1236 27th St. SW
Naples, FL 34117

ARTICLE VI REGISTERED AGENT

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

Diana Gilroy
1236 27th St. SW
Naples, FL 34117

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Diana Gilroy
1236 27th St. SW
Naples, FL 34117

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. Gilroy
Signature/Registered Agent
D. Gilroy
Signature/Incorporator

6/6/08
Date
6/6/08
Date