

P14000047853

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

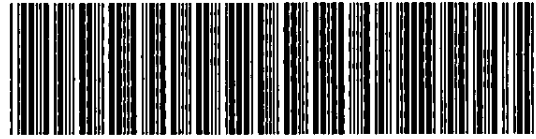
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

h 06/04/14

COVER LETTER

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

SUBJECT: Evelyn Sports Store, 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: Georgelyn Parra
Name (Printed or typed)
232 Jackson Drive, Apt 3
Address
West Palm Beach, Florida 33406
City, State & Zip
561-351-7056
Daytime Telephone number
geomparra@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 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Evelyn Sports Store, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

4481 Lake Worth Road
Store #10
Lake Worth, FL 33461

Mailing address, if different is:

232 Jackson Drive
Apt. 3
West Palm Beach- FL 33406

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Going on business as a store owner.

ARTICLE IV SHARES 100

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Georgelyn Parra, President Name and Title:

Address: 232 Jackson Drive Address:
Unit 3
West Palm Beach, FL 33406

Name and Title: Margarita Cepero, Vice President Name and Title:

Address: 232 Jackson Drive Address:
Unit 3
West Palm Beach, FL 33406

Name and Title: Name and Title:

Address: Address:

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TALLAHASSEE, FLORIDA

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: Georgelyn Parra
 Address: 232 Jackson Drive #3
West Palm Beach, FL 33406

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Georgelyn Parra
 Address: 232 Jackson Drive #3
West Palm Beach, FL 33406

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

5/23/2014
 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

5/23/2014
 Date