

P16000061947

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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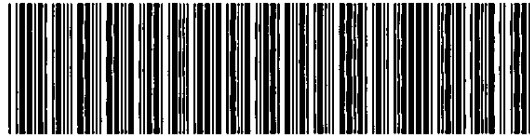
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

2016 JUL 19 AM 8:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: H.O.C. Baseball Group, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Javier Lopez

Name (Printed or typed)

14000 SW 152 Place

Address

Miami, Fl. 33196

City, State & Zip

305-776-6539

Daytime Telephone number

javilopez@bellsouth.net

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: H.O.C. Baseball Group, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

14000 SW 152 Place

Miami, Fl. 33196

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

Promote youth baseball program for players to train, participate, and travel to local baseball leagues, local tournaments /events
national tournaments / events, and international tournaments / events.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Javier A. Lopez, President & Secretary

Name and Title: _____

Address 14000 SW 152 Place

Address: _____

Miami, Fl. 33196

Name and Title: Juan Rodriguez, VP & Treasurer

Name and Title: _____

Address 8593 SW 211 Terrace

Address: _____

Culter Bay, Fl 33189

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: Javier A. Lopez

Address: 14000 SW 152 Place

Miami, Fl. 33196

ARTICLE VII INCORPORATOR

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

Name: Javier A. Lopez

Address: 14000 SW 152 Place

Miami, Fl. 33196

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TALLAHASSEE, FLORIDA


ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 7/14/2016. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business 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

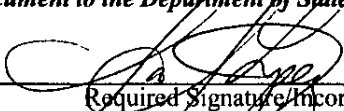


Required Signature/Registered Agent

7/14/16

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

7/14/16

Date