

N 16000011416

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

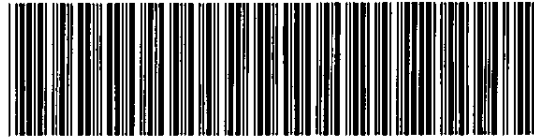
(Business Entity Name)

(Document Number)

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CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

1. Sensei Club Foundation Corp
(CORPORATE NAME) (DOCUMENT #)

2. _____
(CORPORATE NAME) (DOCUMENT #)

3. _____
(CORPORATE NAME) (DOCUMENT #)

☐ Walk-In

☒ Pick up time: _____

☒ Certified Copy

☐ Certificate Of Status

New Filings	
<input type="checkbox"/>	Profit
<input checked="" type="checkbox"/>	Non-Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Other:

Amendments	
<input type="checkbox"/>	Amendments
<input type="checkbox"/>	Resignation
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Other:

Other Filings	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Apostille:
<input type="checkbox"/>	Other:

Examiners Initials

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EFFECTIVE DATE 01/01/17

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: SENSEI CLUB FOUNDATION CORP (EFFECTIVE 01/01/2017)

FILED

ARTICLE II PRINCIPAL OFFICE

16 NOV 30 PM 1:43

Principal street address:

151 CRANDON BLVD

Mailing address, if different is:

151 CRANDON BLVD

APT 136

APT 136

KEY BISCAVNE, FL 33149

KEY BISCAVNE, FL 33149

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

THIS FOUNDATION WILL RAISE FUNDS THRU SPORTING EVENTS AND GIVE BACK TO COMMUNITY.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: By Minutes & By-Laws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: GUSTAVO NEFFA (Director)

Name and Title: JOSE GUGLIATTO (Director)

Address 151 CRANDON BLVD

Address: 151 CRANDON BLVD

APT 136

APT 136

KEY BISCAVNE, FL 33149

KEY BISCAVNE, FL 33149

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: GUSTAVO NEFFA

Address: 151 CRANDON BLVD APT 136

KEY BISCAYNE, FL 33149

ARTICLE VII INCORPORATOR

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

Name: Gustavo Neffa & Jose Gugliatto

Address: 151 CRANDON BLVD APT 136

KEY BISCAYNE, FL 33149

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

Required Signature of Registered Agent

11/29/16
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.

Required Signature of Incorporator

11/29/16
Date