

# N 22000013029

## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:  
Division of Corporations  
Fax Number : (850)617-6381

From:  
Account Name : TAX CARE CELEBRATION  
Account Number : I20190000007  
Phone : (786)845-8854  
Fax Number : (321)473-3052

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

### FLORIDA PROFIT/NON PROFIT CORPORATION BOXABILITY INTERNATIONAL INC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

2022 11 18 PM 3:17

11/18/22

**COVER LETTER**

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

**SUBJECT:** BOXABILITY INTERNATIONAL INC.  
(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:** TAX CARE CELEBRATION  
Name (Printed or typed)  
1400 NW 107TH AVE STE 203  
Address  
SWEETWATER, FLORIDA 33172  
City, State & Zip  
786-845-8854  
Daytime Telephone number  
JESSICA.TORRES@TAXCAREINC.COM  
E-mail address: (to be used for future annual report notification)

10/01/03 2:21

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

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be: BOXABILITY INTERNATIONAL INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
1019 5TH STREET

MIAMI BEACH FL 33139

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To provide special needs youth and youngsters with motor skills disabilities recuperation therapy by using boxing as a therapy tool.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: Elected by Board

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: MERCEDES SPENCER, PRESIDENT

Address: 1019 5TH ST  
MIAMI BEACH, FLORIDA 33139

Name and Title: DINO SPENCER, VICE-PRESIDENT

Address: 1019 5TH ST  
MIAMI BEACH, FLORIDA 33139

Name and Title: BRIAN ROMAN, TREASURER

Address: 1019 5TH ST  
MIAMI BEACH, FLORIDA 33139

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

1019 5TH ST  
MIAMI BEACH, FLORIDA 33139

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: MERCEDES SPENCER

Address: 1019 5TH STREET

MIAMI BEACH, FLORIDA 33139

**ARTICLE VII INCORPORATOR**

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

Name: MERCEDES SPENCER

Address: 1019 5TH STREET

MIAMI BEACH, FLORIDA

**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*

*Mercedes Spencer*

Required Signature of Registered Agent

11/18/2022

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.*

*Mercedes Spencer*

Required Signature of Incorporator

11/18/2022

Date