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(Danuardada Mana)	
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
	_
Special Instructions to Filing Officer:	

Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations

SUBJECT: ARMADA SPORTS & ENTERTAINMENT, INC.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this n	natter to the following:	
CATHRYN WALKER		
Nan	ne of Person	
ECFO CORPORATION		
Firm	/Company	
254 S RONALD REAGAN E	BLVD, SUITE 134	
	Address	
LONGWOOD, FL 32750		
City/St	ate and Zip code	
CASEY@ECFOCORP.COM		
E-mail address: (to be t	ised for future annual report notification)	
For further information concerning this matter, ple	ase call:	
Cathryn Walker at (32	1 ₎ 295-7816	
	rea Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
New Filing Section	New Filing Section	
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327		
2661 Executive Center Circle	Tallahassee, FL 32314	
Tallahassee, FL 32301	,	
Enclosed is a check for the following amount:		
\$70.00 Filing Fee \$\times \text{Certificate of Status}	\$78.75 Filing Fee & Sertified Copy \$87.50 Filing Fee, Certificate of Status &	

Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(Enter name of c	SPORTS & ENTERTAINME corporation; must include "INCOR Corp," "Inc," "Co," or "Corp.")		" "COMPANY," "CORPORATION,"		_
• ,					
(If name unavail	lable in Florida, enter alternate corp	porate name	adopted for the purpose of transacting bus	iness in Floric	la)
_{2.} NEVADA		3.	45-2794536		
(State or country	under the law of which it is incorp	porated)	(FEI number, if applicabl	e)	
4. 6/1/2011		5.	PERPETUAL		<u>. </u>
(Date	e of incorporation)		(Duration: Year corp. will cease to exist	t or "perpetual	")
6. July 2011					
			n Florida, if prior to registration) 502, F.S., to determine penalty liability)		•
₂ 254 S RON			134, LONGWOOD, FL 327	'50	
7.20,0.101		al office add			
SAME					
	(Current	mailing add	ress)		
	ALL LAWELL DISCINE			•	
· — — — — — — — — — — — — — — — — — — —	ALL LAWFUL BUSINE s) of cornoration authorized in hon		ountry to be carried out in state of Florida)		
	•				
9. Name and stree	et address of Florida registered	agent: (P.C	b. Box NOT acceptable)		
Name:	ROY T KIDD			10.	I was to
Office Address:	1809 E BROADWAY	' ST, #1	25	7 th	co ∮
	OVIEDO		riia-32765 [*]	***	II : 1
	(City)		, Florida 32765	82	
10 B:-4d -	414			Öni -	ω
	gent's acceptance: ied as registered agent and to a	iccept servi	ce of process for the above stated corp	ooration at th	ie place
			nent as registered agent and agree to c elative to the proper and complete per		
	r with and accept th g obligation			joimunce oj	my unites
	Mal				
	////////				
_	(Registered agent)	'e cianatura)			
		_			
11. Attached is a	certificate of existence duly aut	henticated,	not more than 90 days prior to deliver	y of this appl	ication to

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	<u></u>
Address:	
Director:	
Address:	
B. OFFICERS	ζος; c o
President: ROY T KIDD	
Address: 1809 E BROADWAY, #125	
OVIEDO, FL 32765	,>
Vice President: PETER GORDON	
Address: 8122 SANDPOINT BLVD	
ORLANDO, FL 32819	
Secretary:	
Address:	
Treasurer:	-
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional office	ers and/or directors
13	ns and/or directors.
Signature of Director or Officer	
The officer or director signing this document (and who is listed in number 12 above) affirms are true and that he or she is aware that false information submitted in a document to the Dep third degree felony as provided for in \$1.7155, F.S.	
14. Roy T KIND, PRESIDE Typed of printed name and capacity of person signing application)	WT

SECRETARY OF STATE



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CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **ARMADA SPORTS & ENTERTAINMENT**, **INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since June 1, 2011, and is in good standing in this state.

Electronic Certificate
Certificate Number: C20110721-0964

You may verify this electronic certificate online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on July 21, 2011.

ROSS MILLER Secretary of State