Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000226672 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name : C T CORPCRATION SYSTEM Account Number : FCA000000023 Phone : (850)205-8842 Fax Number : (850)878-5368

**Enter the email address for this business entity to be used for future

Email Address:__

FOREIGN PROFIT/NONPROFIT CORPORATION **QUOGUE SPORTS INSTITUTE**

Certificate of Status	0
Certified Copy	0
Page Count	944
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

SEP 2 1 2016

Y SULKER

COVER LETTER

TO: New Filing S Division of C	Corporations		·
SUBJECT: Quogue S	Ports Institute, Tre. Name of Corporat		
	Name of Corporat	ion – must include suffix	
Dear Sir or Madam;			
Affairs in Florida", "C	ation by Foreign Not for Profestificate of Existence", or "renced not for profit corpora	Certificate of Status" and c	heck are submitted to
Please return all corres	spondence concerning this m	atter to the following:	
	·.		
	Name	of Person	
 -	Firm/0	Company	
	Ad	dress	
	City/State a	and Zip Code	
W/K	OTHBAUMO	PQUOGUEC	CAPITAL, COM
E-1	nail address: (to be used for	future annual report notific	CAPITAL. Com
For further information	concerning this matter, ples	ase call:	
	•		
	at g	Area Code & Daytime Te	
. Name	of Person at j	Area Code & Daytime Te	elephone Number
MAILING AL New Filing Sec	DRESS:	STREET/CO New Piling S	OURIER ADDRESS:
Division of Co.	rporations	Division of C	orporations
P.O. Box 6327 Tallahassoc, Fl	J 32314	Clifton Build 2661 Executi Tallahassee, I	ve Center Circle
Enclosed is a check for	the following amount:		
□ \$70.00 Filing Fee	☐\$78.75 Filing Fee & Certificate of Status	☐\$78.75 Filing Pee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

			x by a nonprofit corpora			_
(If name unavailal	ble in Plorida, enter alternate corporate na	me adopted for the p	purpose of transacting b	usiness in	Florida))
2. Delaware		3 81-3490624				
	under the law of which it is incorporated	\	El number, if applicable	(e)		
4. 8/2/2016		5. Perpetual				
(Date	of Incorporation)	(Duration: Yes	r corp. will cease to exi	at or "perp	etual")	
6.						
(Date first conducte	d affairs in Florida if prior to registration. S	ee sections 617.1501	& 617.1502, F.S., to del	ermine per	alty liab	ภิในy.)
	wy., Suite 295, Debray Beach, FL 33483			-		
7		al office address)		· · · · ·		
	•	,				
1730 S. Federal H	wy., Suite 295, Delray Beach, FL 33483					
	(Curren	nt mailing address)				_
	•					
B. Nonprofit education	onal sports training (baseball).				, ,	ι
(Purpose(s) of corp	oration authorized in home state or count	ry to be carried out	in the state of Florida)		(4)	-
Name and street	- 44 678idainta 4 77			-	. SE	
. Marrie min arteer	address of Florida registered agent; (I	NO. Box NOT acc	repuable)	375. 173	•••	٠
	C T Corporation System			(11) (11) (11)	1/2	•
Name:	O , conjustion by steam				200	
765 - Add	1200 South Pine Island Road			 <u></u> -	<u> </u>	No.
Office Address:	, , , , , , , , , , , , , , , , , , ,				• •	,
	Plantation	. Florida	33324		(E)	
-	(City)	rionas	(Zip Code)	-		
	• • •		,			
					_	_
10. Registered ag		ervice of process f	for the above stated cores	orporatio to oct in t	n at the his can	s placi vicitu
Having been name	d as registered agent and to accept se	introput de varietes		U WL, 1/1 1	" " C " "	mu.
Having been name lesignated in this a urther agree to co	pplication, I hereby accept the appoint or ply with the provisions of all statute	es relative to the p	roper and complete i	performa.	nce of t	· · · · ·
Taving been name lesignated in this a urther agree to co	pplication, I hereby accept the appoint	es relative to the p	roper and complete i	verform a	nce of i	,,, <u>,</u>
Having been name lesignated in this a urther agree to co	pplication, I hereby accept the appoint or ply with the provisions of all statute	es relative to the p	roper and complete i	performa.	nce of i	y

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application 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.

2. Names and addresses of officers and/or directors	
. DIRECTORS	
irector: Wayna Raibhausa	
110.16 (110.16)	
ddress: 1730 S. Federal Hwy., Suite 295, Delray Beach, FL 33483	·····
ce Cheirman:	
ddress:	
rector:Teresa Throckmorton	
idress: 1730 S. Federal Hwy., Suite 295, Delray Beach, FL 33483	
Victor Seitles	
1730 S. Federal Hwy., Suite 295, Delray Beach, FL 33483	
	5
AFFICENC	: 52
OFFICERS ssident: Wayne Rothbaum	
i 730 S. Federal Hwy., Suite 295, Delray Beach, FL 33483 dress:	m
dress:	
e President:	(059)
dress:	·
Teresa Throckmorton	
iress: 1730 S. Federal Hwy., Suite 295, Detray Beach, FL 33483	
Victor Seitles	
1730 S. Federal Hwy., Suite 295, Delray Beach, FL 33483	
TE: If necessary, you may awach anyaddendum to the application listing a	
(Signature of Chairman, Vice Chairman, or any officer listed in no	M Seitles Director
Victor Seitles, Treasurer and Director	
(Typed or printed name and capacity of person signi-	ng application)

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "QUOGUE SPORTS INSTITUTE" IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE TWELFTH DAY OF SEPTEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS AN EXEMPT CORPORATION.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

6113610 8300C SR# 20165736472

You may verify this certificate online at corp.delaware.gov/authver.shtml

Jaticey W. Burlack, Secretary of State

Authentication: 202971946

Date: 09-12-16

9/20/2016 9:13:01 AM From: To: 8506176383(2/6)



September 13, 2016

FLORIDA DEPARTMENT OF STATE Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: QUOGUE SPORTS INSTITUTE

REF: W16000063049

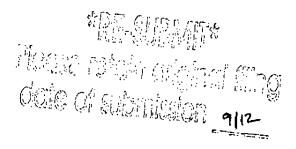
We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II FAX Aud. #: H16000226672 Letter Number: 216A00019387



If SEP 20 AR ID: 40

P.O BOX 6327 - Tallahassee, Florida 32314