

1098880/1237

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

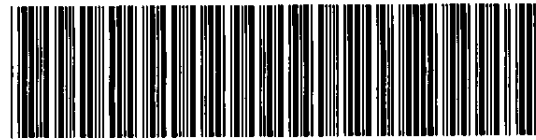
(Business Entity Name)

(Document Number)

Certified Copies 1 Certificates of Status       

Special Instructions to Filing Officer:

Office Use Only



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RECEIVED  
09 NOV 23 AM 11:34  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
09 NOV 23 AM 11:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

60-56-11  
100

## COVER LETTER

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

SUBJECT: Fun Kids Golf 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: DAVID LETSON  
Name (Printed or typed)

8440 Ivy Brook Ln  
Address

Tallahassee FL 32312  
City, State & Zip

(850) 445-3664  
Daytime Telephone number

info @ Funkidsgolf.com  
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 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

**FUN KIDS GOLF INC.**

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

**8440 IVY BROOK LN  
TALLAHASSEE, FL 32312**

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**Non Profit Corporation to promote a youth  
golf diversion Program.**

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

**As stated in By-laws**

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

List name(s), address(es) and specific title(s):

<b>Pete Butler</b>	<b>Michael Philips</b>	<b>Randy Enwright</b>
<b>8440 IVY BROOK LN</b>	<b>8440 IVY BROOK LN</b>	<b>6740 VISALIA PLACE</b>
<b>TALLAHASSEE, FL 32312</b>	<b>TALLAHASSEE, FL 32312</b>	<b>TALLAHASSEE, FL 32312</b>

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

**DAVID LETSON  
8440 IVY BROOK LN  
TALLAHASSEE, FL 32312**

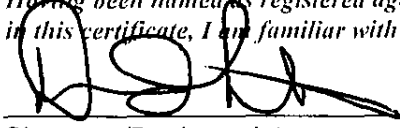
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

**DAVID LETSON  
8440 IVY BROOK LN  
TALLAHASSEE, FL 32312**

\*\*\*\*\*

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.



Signature/Registered Agent



Signature/Incorporator

**FILED**

**09 NOV 23 AM 11:42**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**11/23/09**

Date

**11/23/09**

Date