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(Cit	ty/State/Zip/Phone	: #)		
PICK-UP	☐ WAIT	MAIL		
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Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
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Office Use Only



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COVER LETTER

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

SUBJECT:	CORAL SPRINGS MAD DAWGS TVC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)		
Enclosed is an original a \$70.00 Filing Fee	and one (1) copy of the Artic \sum \frac{1}{3}78.75 Filing Fee & Certificate of Status	les of Incorporation and \$78.75 Filing Fee & Certified Copy	a check for: \$87.50 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
FROM:	ELUIS A COFRESI Name (Printed or typed) 8938 NW 26 CT Address CORAL SPRINGS, FL 33065 City, State & Zip		
	954-682-2397 Daytime Telephone number		
L42511188@BELLSOUTH.NET			

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

E-mail address: (to be used for future annual report notification

ARTICLES OF INCORPORATION

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

AR1	ICLE	I 1	NAME

The name of the corporation shall be: CORAL SPRINGS MAD DAWGS TNC.

FILED

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 8938 NW 26 CT CORAL SPRINGS, FL 33065

2010 FEB -1 ₱ 1:42

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TRAVEL BASEBALL

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed: VOTE

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

LUIS A COFRESI, PRESIDENT, 8938 NW 26 CT CS, FL 33065 FRANK PENAGOS, VICE-PRESIDENT, 9703 NW 28 ST, CS, FL 33065 ANDREW GONZALEZ, FIELD DIRECTOR, 6304 NW 39 ST, CS FL, 33067 DIMAS RODRIGUEZ, TRESUARO, 6130 NW 41 DR CS, FL 33067

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

LUIS A COFRESI 8938 NW. CS, FL 33065 264 CS FL 33065

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: LUIS A COFRESI 8938 NW 26 CT CS FL, 33065

Having been named as registered agent to accept service of p in this certificate, I am familiar with and accept the appointn	rocess for the above stated corporation at the place designated
	1-28-10
Signature/Registered Agent	Date / 2.62
M	1-28-10
Signature/Incorporator	Date