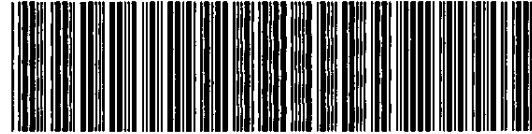


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(Requestor's Name)

(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:

David Varga S GAVE

AUTHORIZATION BY PHONE TO

CORRECT Suffice / Article IV  
(DIRECTORAS)

DATE \_\_\_\_\_

DO NOT SIGN PS

Office Use Only

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 JUN 28 AM 11:42

1011-31105 PS 6/29/11



**FLORIDA DEPARTMENT OF STATE**  
**Division of Corporations**

June 7, 2011

**LATIN AMERICAN MOTORCYCLE ASSOCIATION**  
**522 BLACKSTONE AVE**  
**DELTONA, FL 32725**

**SUBJECT: L.A.M.A. INTERNATIONAL MOTORCYCLE ASSOCIATION CO.**  
**Ref. Number: W11000031105**

We have received your document for L.A.M.A. INTERNATIONAL MOTORCYCLE ASSOCIATION CO. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

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) 245-6901.

Pamela Smith  
Regulatory Specialist II

Letter Number: 911A00013951

## COVER LETTER

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

SUBJECT: L.A.M.A. INTERNATIONAL MOTORCYCLE ASSOCIATION CO.  
(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: LATIN AMERICAN MOTORCYCLE ASSOCIATION  
Name (Printed or typed)

522 BLACKSTONE AVE.  
Address

DELTONA, FL. 32725  
City, State & Zip

215.284.6004  
522 BLACKSTONE AVE phone number

lamadavid@gmail.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** L.A.M.A. INTERNATIONAL MOTORCYCLE ASSOCIATION INC.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
522 BLACKSTONE AVE  
DELTONA, FL. 32725

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

TO ACT AS THE WORLD GOVERNING BODY OF THE MOTO-TOURING. TO ORGANIZE, SANCTION, REGULATE AND CELEBRATE LOCAL, STATE, NATIONAL AND INTERNATIONAL WORLD CHAMPIONSHIP IN THIS SPORT. THE SECOND IMPORTANT PROMULGATE SAFETY AWARENES EDUCATION ON PROPER HANDLING OF MOTORCYLES.

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

DIRECTORS ARE ELECTED EVERY TWO YEARS BY A MAJORITY VOTE OF THE MEMBERS OF THE LATIN AMERICAN MOTORCYCLE ASSOCIATION AND L.A.M.A. INTERNATIONAL MOTORCYCLE ASSOCIATION

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

Name and Title: Mario Nieves Inter. President  
Address: 3519 W. Fullerton ave.  
Chicago, IL. 60647

Name and Title: David Vargas Inter. Business Manager  
Address: 522 Blackstone ave.  
Deltona, FL. 32725

Name and Title: Mike Ramos Inter. Vice President  
Address: 3519 W. Fullerton ave  
Chicago, IL. 60647

Name and Title: Johnny Urrutia Inter. Secretary  
Address: 15919 Oldstone Place  
Tampa, FL. 33624

Name and Title: Leonardo Pedraza Inter. Treasurer  
Address: 5132 2nd Road  
Lake Worth, FL. 33467

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

**ARTICLE VI REGISTERED AGENT**

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

Name: David Vargas  
Address: 522 Blackstone ave  
Deltona, FL. 32725

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: David Vargas  
Address: 522 Blackstone ave  
Deltona, FL. 32725

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]  
Required Signature of Registered Agent

6.1.11  
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.

[Signature]  
Required Signature of Incorporator

6.1.11  
Date

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 JUN 28 AM 11:42