

N120000000/10

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K 01/05/12

## COVER LETTER

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

SUBJECT: Miramar Canes 10u, 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: Miguel Gomez  
Name (Printed or typed)

18920 West Lake Dr  
Address

Hialeah, Florida 33015  
City, State & Zip

305-389-6704  
18920 West Lake Drive Phone number

audioimpressions@aol.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:

**Miramar Canes 10u, Inc.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
18920 West Lake Drive  
Hialeah, Florida 33015

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Manage and promote Miramar 10u baseball team for the development of the childrens skills and provide competitive baseball environment.

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

**As provided by in the bylaws.**

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

Name and Title: Miguel Gomez, President  
Address: 18920 West Lake Dr  
Hialeah, FL 33015

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

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

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

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

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: Miguel Gomez  
Address: 18920 West Lake Dr  
Hialeah, FL 33015

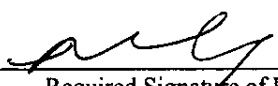
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Miguel Gomez  
Address: 18920 West Lake Dr  
Hialeah, FL 33015

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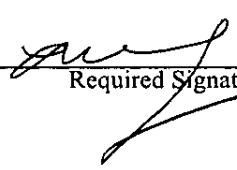
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
Required Signature of Registered Agent

12/22/11

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.*

  
Required Signature of Incorporator

12/22/11

Date