11/2000004097

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	= #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



000228799850

04/13/12--01007--006 **70.00

12 APR 19 PH 4: 45

WA CHANGE OF THE PROPERTY OF T

COVER LETTER

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

SUBJECT: TAMUN BAY AREA SOORTS OFF-CIALS, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original	l and one (1) copy of the Ar	ticles of Incorporation and	d 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: GARY STANLEY
Name (Printed or typed)

5/3 NE 4th Ave
Address TRENTON, FI 32693
City, State & Zip 352 - 519 - 6443 Daytime Telephone number E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 16, 2012

GARY STANLEY 513 NE 4TH AVE TRENTON, FL 32693

SUBJECT: TAMPA BAY AREA SPORTS OFFICIALS INC

Ref. Number: W12000020948

We have received your document for TAMPA BAY AREA SPORTS OFFICIALS INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as or is not distinguishable from the name of an administratively dissolved or revoked business entity which has a reinstatement application pending on our records. Please select a new name or add one or more major words to the current name to make it distinguishable. Simply adding "of Florida" or "Florida" to the end of the name is not acceptable.

The document number of the conflict is N07000003882.

Please return the corrected original and one copy of 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) 245-6052.

Justin M Shivers Regulatory Specialist II New Filing Section

Letter Number: 112A00011835

ARTICLES OF INCORPORATIONIn compliance with Chapter 617, F.S., (Not for Profit)

RTICLE II	PRINCIPAL OFFICE					
	Principal street address		Mailin	Mailing address, if different is:		
	5/3/VE 4th 1/10	 .				
	TRUNIUN JET BASIS					
RTICLE III	PURPOSE /	_		_		
he purpose for v	PURPOSE which the corporation is organized is: The The Ton CETACL Shed for The Tongon Con Con Con Con Con Con Con Con Con C	mus Boy A	IRUN Spoö	5 OH	0.11/5 1	NO,15
DRA ON B	ATION ESTABLISHED FOR TH	e puppos	se of As	5:9N:	Ng KNON	vridge
DROTESS	ronal officials to you	Th SPONT	5 AND F	REERER	TON A	etili
Local L	engues Ayer ReesentionA	h thoising	S IN The	y Tam	PN BAL	'ARCK
Jude Hil	ISBOROUGH, P.NULLAS, PASCO	AND HER	NANDO CO	unto	5.	
RTICLE IV	MANNER OF ELECTION The manner	in which the director	s are creeced and i	pponted.		
Den Will	be an Election of Off	rong Even	y Two y	HARS	in The	, MOOL
Name and T	TINITIAL OFFICERS AND/OR DIRECT	Name and Title	· ANDIL CA	00L:0 -	TREASUR.	00
Address:	SIB NEI 4th DVE	Address:	13642	PARK	LK DR	
	TRONTON, FI		Tompo,	FI	7.45 2	
	32693	<u>. </u>		<u>-</u>	<u> </u>	3
Name and T	Title: Julio GAREIN - VP FLAG	Name and Title	e:			
Address:	1006 W Pensinular ST	Address:				
	Tampa, El	<u> </u>				
	33603					
Name and T	Title: Wayne Ganula - UP Tackle	Name and Title	e:			
Address:		Address:			-118 111	
			u			
				11.50	ন্ত	
RTICLE VI	REGISTERED AGENT		_		1.0	
	orida street address (P.O. Box NOT acceptable	of the registered age	ent is:		A ÷ in	•
Name: Address:	SIZINE 4th AVE	<u></u>				٠.
Address.	JOHN TON FI			196	(O)	•
	32693	3		i de la companya de l	⊋ 🖰	
				न निर्मी बहुतात १९ ५ ईस्ट्रो		
RTICLE VII	INCORPORATOR				***	
*	Idress of the Incorporator is:			•	ភ	
Name: Address:	6121 NE 4th AVE					
Address.	30 (1) Tank R1					
	3269	<u>ব</u>				
	ned as registered agent to accept service of pr				ace designated	d in this
ertificate, I am f	amiliar with and accept the appointment as regis	tered agent and agre	ee to act in this ca	pacity	,	
Las	The !			4/11	12012	
Dar	Required Signature of Registered Agen	•	_	/////Do	te de la	_
(Acquired diginature of Registered Agen	•		, joa		
	ument and affirm that the facts stated herein ar			rmation su	bmitted in a de	ocument
the Departmen	t of State constitutes g third degree felony as pro	vided for in s.817.15	5, F.S.			
//	At 1			14/1.	/a.,	
<i>//</i>				-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1010	