## N13000002218

| (Re                       | questor's Name)   |           |
|---------------------------|-------------------|-----------|
| ·                         |                   |           |
| (Address)                 |                   |           |
|                           |                   |           |
| (Address)                 |                   |           |
|                           |                   |           |
| (Cit                      | y/State/Zip/Phone | e #)      |
|                           |                   |           |
| PICK-UP                   | ☐ WAIT            | MAIL      |
|                           |                   |           |
| (Bu                       | siness Entity Nar | ne)       |
| •                         | •                 | •         |
| (Do                       | cument Number)    |           |
| ,50                       |                   |           |
| Certified Copies          | Cortificates      | of Status |
| Octanica copies           | _ Certificates    | O Status  |
|                           |                   |           |
| Special Instructions to I | Filing Officer:   |           |
|                           |                   |           |
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Office Use Only



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03/07/13--01023--006 \*\*8.75

03/07/13--01023--005 \*\*70.00

SECONDATE OF STATE PALLAHASSIFE FLORIDA

J. Shivers MAR 0 8 2013

## **COVER LETTER**

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

| SUBJECT: | Powertumble             | booster           | Club    | Corp. |
|----------|-------------------------|-------------------|---------|-------|
|          | (PROPOSED CORPORATE NAI | ME – 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: Milena Abreu
Name (Printed or typed)

608 LA VIlla Drive

miami Springs, fl 33166 City, State & Zip

(305) 303 - 4692

Daytime Telephone number

milena Abreulaw ognail. Com E-mail address: (to be used for future annual report notification)

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

3 MAR -7 AM 11: 3

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

| ARTICLE I NAME The name of the corporation shall be: Power-to.             | mble · Booster Club Corp.  |
|--|--|
| ARTICLE II PRINCIPAL OFFICE  |  |
| Principal <u>street</u> address: 8855 NW 35 LAN                            | Mailing address, if different is:  |
| Doral, Fla 331   | 72   |
| ARTICLE III PURPOSE  |  |
| •  | xclusively for charitable and educational  |
| <u> </u>   | 501(c)(3) of the IBS code. Specifically,   |
| the corporation is organized to  | o-foster and promote national and international  |
| competitive youth aumnastics   | s. The corporation shall do all things necessary   |
| <del>-</del>   | ntaining tax exempt status under sec. soi(c)3)   |
|  | of exclusively for purposes of coep, or distributed  |
| to organizations operated exclusive to fedural, state or local government, | the for charitable purposes under 501(03) or distributed for a public purpose.  The manner in which the directors are elected and appointed: Once a year,  |
| ARTICLE V INITIAL OFFICERS AND/OR D  | tion by majority vote of club members.   |
|  |  |
| ı  | Name and Title: Alejandra Uargas   |
| 8855 NW 35 LANG  | _ Address: Secretary Est & & & & & & & & & & & & & & & & & & &   |
|  |  |
| Doial, Fla 33172   | ~ The contract of the contract |
|  | _ Name and Title: Milena Abrew 500 =   |
| Address <u>Vice President</u>  |  |
| 8855 NW 35 LANC  |  |
| DOTAL, PIQ 33172   |  |
| Name and Title: Angelica Winones   | Name and Title: Andreing MARQUEL   |
| Address <u>Sevetary</u>  | Address: bd. member  |
| 8855 NW 35 LANE  | 8855 NW 35 LANE  |
| DOIAI FIA 33172  | DOIAL FL 33172   |

| Name and Title: LESUIA Leal   | Name and Title:   |
|---|---|
| Address <u>bo</u> member  | Address:  |
| 8855 NW 35 LAND   | <u></u>   |
| Doral F1 33172  |   |
| Name and Title:   | Name and Title:   |
| Address   | •   |
|   |   |
| •   |   |
|   |   |
| ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acce                                      | ptable) of the registered agent is:   |
| Name: <u>Milena Abreu</u>   | <u>E5q.</u>   |
| Address: 608 LAVIIIa Dric   | 20  |
| Minni Springs, fl   | $\simeq$ $\simeq$ $\simeq$  |
| ARTICLE VII INCORPORATOR  |   |
| The <u>name and address</u> of the Incorporator is:   |   |
| Name: <u>Milena Abreu</u>   | <u>E59.</u>   |
| Address: 608 LA VIIIQ Driv  |   |
| mimi springs, f   | <u> 33</u> 166  |
| Having been named as registered agent to accept service certificate, I am familiar with and accept the appointment of   | of process for the above stated corporation at the place designated in this is registered agent and agree to act in this capacity |
| Mida () love  | 1/31/13   |
| Required Signature of Registered  | Agent Date  |
| I submit this document and affirm that the facts stated here to the Department of State constitutes whird degree felony | ein are true. I am aware that any false information submitted in a document   |
| Required Signature of Incor   | 1/31/13   |