

N13000004639

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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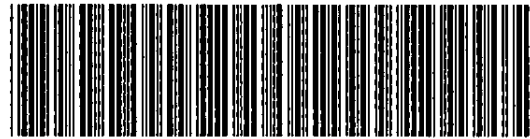
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 MAY 16 PM 2:01

Per [signature] 23-252649



RECEIVED

13 MAY 16 PM 12:29

DIVISION OF CORPORATIONS

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 1, 2013

JEFFREY SAUERS  
2250 SW 19 TERR  
MIAMI, FL 33145

SUBJECT: SKATE FLORIDA, INC.  
Ref. Number: W13000025669

We have received your document for SKATE FLORIDA, 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 it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

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) 245-6052.

Pamela Smith  
Regulatory Specialist II

Letter Number: 213A00010494

## COVER LETTER

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

SUBJECT: Skate Free, 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: Jeffrey Sauers  
Name (Printed or typed)

2250 SW 19 Terrace  
Address

Miami, FL 33145  
City, State & Zip

305-951-5757  
Daytime Telephone number

jeffrey.sauers@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)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLE I    NAME**

The name of the corporation shall be: SKATE FREE, INC.

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**ARTICLE II    PRINCIPAL OFFICE**

Principal street address:

Mailing address, if different is:

2250 SW 19 Terrace

Miami, FL 33145

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_

Exclusively for charitable and educational purposes, including, for such purposes, the making of  
distributions to organizations that qualify as exempt organizations under section 501(c)(3) if the  
Internal Revenue Code, or the corresponding section of any future federal tax code.

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

Directors must be nominated by a current member of the board. Directors are appointed after a majority of board approve the nomination.

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

Name and Title: Jeffrey Sauers, Executive Director

Name and Title: Daniel Fuenzalida, Treasurer

Address 2250 SW 19 Terrace

Address: 401 Ocean Drive, apt 1023

Miami, FL 33145

Miami Beach, FL 33139

Name and Title: Matt Cantor, Secretary

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

Address 11220 SW 71st Avenue

Address: \_\_\_\_\_

Miami, FL 33156

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

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

Address \_\_\_\_\_

Address: \_\_\_\_\_

13 MAY 16 PM 2: 01

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

Address \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

Address \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: \_\_\_\_\_ Jeffrey Sauers

Address: \_\_\_\_\_ 2250 SW 19 Terrace

\_\_\_\_\_ Miami, FL 33145

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: \_\_\_\_\_ Jeffrey Sauers

Address: \_\_\_\_\_ 2250 SW 19 Terrace

\_\_\_\_\_ Miami, FL 33145

*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

\_\_\_\_\_  
5/13/13  
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

\_\_\_\_\_  
5/13/13  
Date