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SECRETARY OF STATE
TALLAHASSEE FLORIDA

13 JUL 11 PM 2:30

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COVER LETTER

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

SUBJECT: Brandon Blazers Baseball Club, 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: Jason Conti
Name (Printed or typed)

850 Bayou View Drive
Address

Brandon FL 33510
City, State & Zip

813-849-3886
Daytime Telephone number

Conti SG@yahoo.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: Brandon Blazers Baseball Club, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

850 Bayou View Dr
Brandon, FL 33510

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: exclusively for charitable,
social, and educational purposes. The specific
purpose of the corporation shall be to
operate youth baseball teams and leagues,
and any activities related thereto.

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

Appointed by the president

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jason Conti - President Name and Title: _____

Address: 850 Bayou View Dr Address: _____
Brandon, FL 33510

Name and Title: Kevin Leshko - Director Name and Title: _____

Address: 1433 Lakeshore Ranch Dr Address: _____
Seffner, FL 33584

Name and Title: Alex Fernandez - Director Name and Title: _____

Address: 875 Bayou View Dr Address: _____
Brandon, FL 33510

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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13 JUL 11 PM 2:31

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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:

Jason Conti

Address:

850 Bayou View Dr
Brandon, FL 33510

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Jason Conti

Address:

850 Bayou View Dr
Brandon, FL 33510

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

JC
Required Signature of Registered Agent

7/10/13
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.

JC
Required Signature of Incorporator

7/10/13
Date