

N13000009791

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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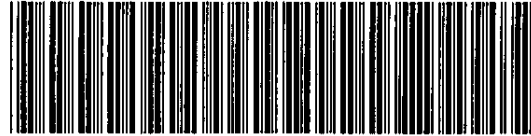
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/28/13--01032--009 **70.00

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13 OCT 28 PM 12:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
10/29/13

COVER LETTER

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

SUBJECT: **Falcon Cheer 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: **Ivonne Aguilar**

Name (Printed or typed)

20253 SW 128 Place

Address

Miami, Florida 33177

City, State & Zip

305-898-2599

Daytime Telephone number

falconcheerinc@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)

ARTICLE I NAME

The name of the corporation shall be: Falcon Cheer Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

20253 SW 128 Place

Miami, Florida 33177

Mailing address, if different is:

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Provide means for the Falcon Cheerleaders to order non school related gear and register for competitions as a cheer team not affiliated with a school

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

President appoints directors

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ivonne Aguilar - President

Address: 20253 SW 128 Place
Miami, Florida 33177

Name and Title: Joany Lobo

Address: 6201 SW 138 Court #G
Miami, Florida 33183

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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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: Ivonne Aguilar

Address: 20253 SW 128 Place

Miami, Florida 33177

ARTICLE VII INCORPORATOR

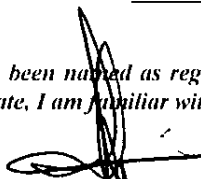
The name and address of the Incorporator is:

Name: Ivonne Aguilar

Address: 20253 SW 128 Place

Miami, Florida 33177

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

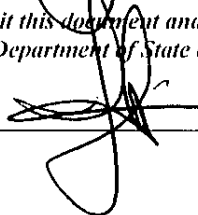


Required Signature of Registered Agent

10-23-13

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

10-23-13

Date