

MISSOURI 1888

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

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MISSOURI 08960



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15 FEB 23 PM 1:30

FEB 23 2015

T. SCOTT



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
15 FEB 23 AM 10:25  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

February 6, 2015

JERREL FORBES  
1470 NW 175 ST  
MIAMI, FL 33169

SUBJECT: VIKINGS ON DECK, INC.  
Ref. Number: W15000008960

We have received your document for VIKINGS ON DECK, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 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.

Tyrone Scott  
Regulatory Specialist II  
New Filings Section

Letter Number: 315A00002558

## COVER LETTER

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

SUBJECT: **Vikings On Deck, 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: **jerrel forbes**

Name (Printed or typed)

**1470 nw 175 st**

Address

**miami, fl 33169**

City, State & Zip

**786 424 3569**

Daytime Telephone number

**dashawn808@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: Vikings on Deck, Inc.

**ARTICLE II    PRINCIPAL OFFICE**

Principal street address:  
1470 NW 175th Street

Miami Gardens, Fl. 33169

Mailing address, if different is:

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is: To help raise money for the youth football  
athletes at Miami Norland Senior High School. With this approval we hope  
to fundraise and receive donations to cover the remaining costs of  
traveling expenses, player participation awards, and coaching  
development materials that isn't covered by Miami Dade County Public  
Schools.

**ARTICLE IV    MANNER OF ELECTION**

The manner in which the directors are elected and appointed: Are by  
nominations and approval by the head football coach and board of directors.

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

Name and Title: Jerrel Forbes President

Address: 1470 NW 175th Street

Miami Gardens, Fl.

33169

Name and Title: Travis Chester Secretan

Address: 6815 Biscayne Blvd

Miami, Fl.

33142

Name and Title: Jocelyn Ware Presider

Address: 3850 NW 183rd St. #203

Miami Gardens, Fl

33055

Name and Title: Tavon Deloach Treasu

Address: 1470 NW 175th St.

Miami Gardens, Fl.

33169

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

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

15 FEB 23 PM 1:30

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

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

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

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

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**ARTICLE VI REGISTERED AGENT**

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


Name: Jerrel Forbes  
Address: 1470 NW 175th Street  
Miami Gardens, Fl. 33169

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

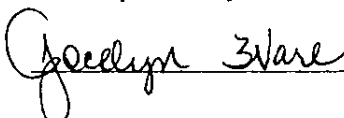
Name: Jocelyn Ware  
Address: 3850 NW 183rd St. #203  
Miami Gardens, Fl. 33055

*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

2/17/15  
\_\_\_\_\_  
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

2/17/15  
\_\_\_\_\_  
Date