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COVER LETTER

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

SUBJECT: North Florid	a Youth Sports, Inc.		
	(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)		
Englaced is an original s	and one (1) convertible Am	tialog of Incomposition and	a abaak far
enciosed is an original a	and one (1) copy of the Ar	ticles of Incorporation and	a check for :
\$70.00	\$78.75	□\$78.75	\$87.50
Filing Fee	Filing Fee &	Filing Fee	Filing Fee,
	Certificate of Status	& Certified Copy	Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
FROM:	Tyrone Maldonado		
r ROW.	Name (Printed or typed)		
	Po Box 551565		
	Address		
	Jacksonville, Fl 32255		
		City, State & Zip	•
	904-472-5899		
	Dayt	ime Telephone number	-

northfloridayouthsports@gmail.com

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

E-mail address: (to be used for future annual report notification)

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

ARTICLE II	PRINCIPAL OFFICE				
			Mailing address, if different is:		
Principal <u>street</u> address: 5457 Keystone Drive North		Po I	Box 551565		
Jacks	Jacksonville, Fl 32207		Jacksonville, Fl 32255-1565		
 ARTICLE III	<u>PURPOSE</u>				
- •	or which the corporation is organized is:				
The purpose of	f the organization shall be to motivate and er	npower children 1	to be self-reliant, develop to their fullest po	otential, and	
become indep	endent resourceful citizens.				
		· · · · · · · · · · · · · · · · · · ·			
	and the second s	· · · · · · · · · · · · · · · · · · ·			
ARTICLE IV	MANNER OF ELECTION The manner	in which the dire	as indicate	ed in the by-	
ARTICLE IV	MANNER OF ELECTION The manner	in which the dire	as indicate	d in the by-	
ARTICLE IV	MANNER OF ELECTION The manner	in which the dire	ctors are elected and appointed:	ed in the by-	
			as indicate ctors are elected and appointed:	ed in the by-	
	MANNER OF ELECTION The manner		as indicate ators are elected and appointed:	ed in the by i	
ARTICLE IV ARTICLE V Name and Titl	INITIAL OFFICERS AND/OR DIRECTO		Thompson, Michelle G - Vice President	ed in the by-ja.	
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTO	ORS Name and Title	Thompson, Michelle G - Vice President	ed in the by ja	
ARTICLE V Name and Titl	INITIAL OFFICERS AND/OR DIRECTO Ponds, Antwaune - Presendent	<u>DRS</u>	Thompson, Michelle G - Vice President	ed in the by-	
ARTICLE V Name and Titl	Ponds, Antwaune - Presendent Po Box 551565	ORS Name and Title	Thompson, Michelle G - Vice President Po Box 551565	ed in the by-	
ARTICLE V Name and Titl Address	Ponds, Antwaune - Presendent e: Po Box 551565 Jacksonville, Fl 32255 Thompson, Sonia K - e Secretary	ORS Name and Title: Address:	Thompson, Michelle G - Vice President Po Box 551565 Jacksonville, Fl 32255	ed in the by-	
ARTICLE V Name and Titl Address Name and Titl	Ponds, Antwaune - Presendent e: Po Box 551565 Jacksonville, Fl 32255 Thompson, Sonia K - e Secretary	Name and Title: Address: Name and Title:	Thompson, Michelle G - Vice President Po Box 551565 Jacksonville, Fl 32255	ed in the by-	
ARTICLE V Name and Titl Address	Ponds, Antwaune - Presendent e: Po Box 551565 Jacksonville, Fl 32255 Thompson, Sonia K - e Secretary	ORS Name and Title: Address:	Thompson, Michelle G - Vice President Po Box 551565 Jacksonville, Fl 32255 Furlow, Melba - Assistant Secretary	ed in the by-	
Name and Titl Address Name and Titl Address	Ponds, Antwaune - Presendent e: Po Box 551565 Jacksonville, Fl 32255 Thompson, Sonia K - e Secretary e: Po Box 551565 Jacksonville, Fl 32255	Name and Title: Address: Name and Title: Address:	Thompson, Michelle G - Vice President Po Box 551565 Jacksonville, Fl 32255 Furlow, Melba - Assistant Secretary Po Box 551565 Jacksonville, Fl 32255		
ARTICLE V Name and Titl Address Name and Titl Address	e: Ponds, Antwaune - Presendent Po Box 551565 Jacksonville, Fl 32255 Thompson, Sonia K - e Secretary Po Box 551565 Jacksonville, Fl 32255 Daniels, Jarrett G - Treasure	Name and Title: Address: Name and Title: Address: Name and Title: Address:	Thompson, Michelle G - Vice President Po Box 551565 Jacksonville, Fl 32255 Furlow, Melba - Assistant Secretary Po Box 551565 Jacksonville, Fl 32255 Maldonado, Tyrone - Director	DIVISION 16 APR	
Name and Titl Address Name and Titl Address	Ponds, Antwaune - Presendent e: Po Box 551565 Jacksonville, Fl 32255 Thompson, Sonia K - e Secretary e: Po Box 551565 Jacksonville, Fl 32255	Name and Title: Address: Name and Title: Address:	Thompson, Michelle G - Vice President Po Box 551565 Jacksonville, Fl 32255 Furlow, Melba - Assistant Secretary Po Box 551565 Jacksonville, Fl 32255		

Name and Title:	<u> </u>	Name and Title:
Address		Address:
•		
Name and Title:		Name and Title:
Address		Address:
•		
•		······································
	<u>REGISTERED AGENT</u> Torida street address (P.O. Box NOT acce	entable) of the registered agent is:
	Tyrone Maldonado	spanie) of the registered agent is.
Name:	5457 Keystone Drive No	 orth
Address:		<u> </u>
	Jacksonville, Fl 32207	
The name and a	INCORPORATOR Iddress of the Incorporator is: Tyrone Maldonado	
Name:	5457 Keystone Drive No	orth
Address:		
	Jacksonville, Fl 32207	
ARTICLE VIII	EFFECTIVE DATE:	(0-11-0-11-11-11-11-11-11-11-11-11-11-11-
Effective date, if	f other than the date of filing: date is listed, the date must be specific a	
after the filing.		
		applicable statutory filing requirements, this date will not be listed as the
document's effe	ctive date on the Department of State's rec	ords.
		of process for the above stated corporation at the place designated in this as registered agent and agree to act in this capacity
Tu	Required Signature of Registered	3/28/2016
	Required Signature of Registered	d Agent Date
	cument and affirm that the facts stated her nt of State constitutes a third degree felony	rein are true. I am aware that any false information submitted in a document v as provided for in s.817.155, F.S.
-	Required Signature of Inco	3/28/2016
	Required Construe of Inco	omorator Date

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