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PICK-UP	☐ WAIT	MAIL		
(E	dusiness Entity Name)			
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to Filing Officer:				
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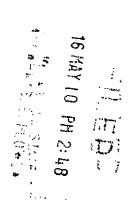
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04/15/16--01031--008 \*\*78.75



S. GILBERT

MAY / / 2016

C OUDED-



04/08/2016

To whom it may concern,

This letter is written to inform the Florida Department of State that the board directors for filetsports are not going to revoke the solution of FILETSPORTS, LLC: Document; L14000179930 and want to file it as non-profit.

Thank You

Samuel Pierre

04/11/16

## **COVER LETTER**

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

SUBJECT: Filets Ports INC (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

FROM: SAMUEL PIERRE
Name (Printed or typed)

2355 NW 170th AVE
Address

Pembeoke Pures, FL 33028

City, State & Zip

786-537-3187

Daytime Telephone number

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

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



April 22, 2016

SAMUEL PIERRE 2255 NW 170TH AVE PEMBROKE PINES, FL 33028

SUBJECT: FILETSPORTS, INC Ref. Number: W16000030277

We have received your document for FILETSPORTS, 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):

We are enclosing the proper form(s) with instructions for your convenience.

The last page of your Non-Profit Articles was not enclosed. Please complete the enclosed form and resumit for processing.,

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.

Sylvia Gilbert Regulatory Specialist II New Filing Section

Letter Number: 916A00008417



April 22, 2016

SAMUEL PIERRE 2255 NW 170TH AVE PEMBROKE PINES, FL 33028

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Sylvia Gilbert Regulatory Specialist II New Filing Section

Letter Number: 916A00008417

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

The name of the corporation shall be: Hilets Ports Inc	
ARTICLE II PRINCIPAL OFFICE	<b>-</b>
Principal street address:	Mailing address, if different is:
2255 NW 170th AVE	Mailing address, if different is:
Pembroke Pures, Fil 33028	(SAMR)
ARTICLE III PURPOSE  The purpose for which the corporation is organized is: 5700 May 200	exclusion to chasitable selvin
The purpose for which the corporation is organized is: organized courses for which the corporation is organized is:	in cluding, for such purposes,
the making of distributions to organ	izatione that qualify as
exempt organizations described und	les section SDI(c)(3) of the TRS
exempt organizations described und or Compending section of any future	re federal tox code
(PICASE Add Has nem ainime Sentences to look to the back of the page ARTICLE IV MANNER OF ELECTION The manner in which the direction	the anticle from the IRS Page)
Athe Corporation shall be those becomes vietor shell held office until the next annual heaters of contractions shall be those becomes arricle v initial officers and/or directors	
Name and Title: Hanlon Delakme, Presid Name and Title:	MAX Jeanty, vice President
Address 2255 NW /70th Ave Address:	
Pembrope Pures, F. (33028	SAME
Name and Title: Angeline Joseph Secretary Name and Title:	Samuel Pierre, Telessiner
Address Address:	, , , , , , ,
SAME	SAME
Name and Title: Darly Milcourt, Name and Title:	Franck Y. Al Phonse, Mimbir
•	THE PARTITIONS OF THE PARTITION OF THE P
Address: Address:	Same.

	(Mimbu).		
Name and Title:	Johnny, Dee Wyge	Name and Title:	,
Address		Address:	<b>:</b>
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Name and Title:	<del>,</del>	Name and Title:	<u> </u>
Address		Address:	
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			· ;
ABIRIOLECUI	BUGIOTERED ACIONE		<b>:</b>
ARTICLE VI The name and F	<u>REGISTERED AGENT</u> <u>lorida street address</u> (P.O. Box <b>NO</b> T acc	reptable) of the registered agent is:	
	Samuel Pience		•
Name:			
Address:	2255 NW 170th A		
	Pembroke lines	TU = 330ZR	
		3300	
ARTICLE VII	INCORPORATOR		•
	ddress of the Incorporator is:		
Name:	Samuel Fier	re	`
Address:	2255 NW MUTHA	ve_	
	Pembroke Pines,	Fl 32028	
ARTICLE VIII	EFFECTIVE DATE:		
Effective date, if	other than the date of filing:	(OPTIONAL)	
(If an effective of after the filing.)		and cannot be more than five business day	ys prior or 90 business days
-			1
	e inserted in this block does not meet the a ctive date on the Department of State's rea	applicable statutory filing requirements, this cords.	date will not be fisted as the
		·	•
Having been na.	med as registered agent to accept service	e of process for the above stated corporation	on 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
Din	nue		05-02.11
	Required Signature of Registere	ed Agent	05-02-16 Date
I submit this doe	ument and affirm that the facts stated he	rein are true. I am aware that any false info	rmation submitted in a document
	ument and affirm that the facts stated he it of State constitutes a third degree felon		TOTAL SHOWING IN A HOUSEHOLD
A)			05-12-10
318	Required Signature of Inco	orporator	0J-02-16 Date
	, ,		