

N1600000 4766

(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:

Office Use Only

N16-30277



600284567256

04/15/16--01031--008 \*\*78.75

FILED  
16 MAY 10 PM 2:48  
U.S. DISTRICT COURT  
NORTH DAKOTA  
FARGO

S. GILBERT

MAY 11 2016

S. GILBERT



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

A handwritten signature in cursive script that reads 'Samuel'.

04/11/16

## COVER LETTER

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

SUBJECT: FiletsPorts, 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: SAMUEL PIERRE  
Name (Printed or typed)

2255 NW 170th AVE  
Address

Pembroke Pines, FL 33028  
City, State & Zip

786-537-3187  
Daytime Telephone number

FiletsPorts@gmail.com  
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 22, 2016

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

SUBJECT: FILETSPTS, INC  
Ref. Number: W16000030277

We have received your document for FILETSPTS, 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 resubmit 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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 22, 2016

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

SUBJECT: FILETSports, INC  
Ref. Number: W16000030277

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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)

**ARTICLE I NAME**

The name of the corporation shall be: Filetsports, INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

2255 NW 170th Ave

Pembroke Pines, FL 33028

Mailing address, if different is:

(SAME)

16 MAY 10 PM 2:48

STATE  
FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations described under section 501(c)(3) of the IRS, or corresponding section of any future federal tax code

(Please Add the remaining sentences to the article from the IRS Page)  
look to the back of this page

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed: The initial Directors

of the Corporation shall be those person specified in the Certificate and Each director shall hold office until the next annual meeting of the board and until such directors successor has been elected and qualified.

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

Name and Title: Harlan DeLorme, President

Address: 2255 NW 170th Ave  
Pembroke Pines, FL 33028

Name and Title: Max Jeanty, Vice President

Address: SAME

Name and Title: Angelina Joseph, Secretary

Address: SAME

Name and Title: Samuel Pierre, Treasurer

Address: SAME

Name and Title: Darby Milcourt, Member

Address: SAME

Name and Title: Franck Y. Alphonse, Member

Address: SAME

(Member)  
Name and Title: Johnny Dee Myers Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
Same  
\_\_\_\_\_  
\_\_\_\_\_  
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: Samuel Pierce  
Address: 2255 NW 170th Ave  
Pembroke Pines, FL 33028

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Samuel Pierce  
Address: 2255 NW 170th Ave  
Pembroke Pines, FL 33028

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL.)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

Samuel

Required Signature of Registered Agent

05-02-16  
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.*

Samuel

Required Signature of Incorporator

05-02-16  
Date