

N16000008015

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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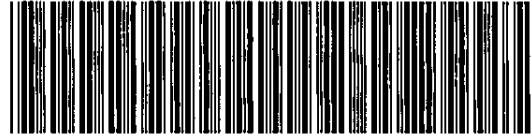
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: Breakthrough Softball Corp.
(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: Harold Welch
Name (Printed or typed)

807 Dr. M.L. King Jr. Blvd.
Address

Seffner FL 33584
City, State & Zip

813-417-9918
Daytime Telephone number

Hwelch@cafe.thorpe.edu
E-mail address: (to be used for future annual report notification)

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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: Breakthrough Softball Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

807 Dr. M.L. King Jr. Blvd
Seffner, FL 33584

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide softball equipment for Hillsborough County Florida Parks and Recreation Department, to sponsor tournaments, at no cost, for economically disadvantaged students to be viewed by college softball coaches.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: New Directors are appointed after a 80% vote of approval from the board.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Harold Welch IV
Address: President
2909 spaniel Lane
Seffner, FL 33584

Name and Title: Katherine Welch
Address: 2909 spaniel Lane
Seffner, FL 33584

Name and Title: Janelle Enriquez
Address: 2313 Valrico Forest
Dr. Valrico, FL 33594

Name and Title: Courtney Welch
Address: 2909 spaniel Lane
Seffner, FL 33584

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TALLAHASSEE, FLORIDA

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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: Harold Welch

Address: 2900 spaniel Lane

Seffner, FL 33584

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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Harold Welch

Address: 2900 spaniel Lane

Seffner, FL 33584

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

Harold Welch

Required Signature of Registered Agent

7/31/2016

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.

Harold Welch

Required Signature of Incorporator

7/31/2016

Date