## N16000009433

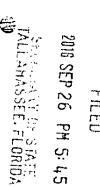
(Requestor's Name)				
(Address)				
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. (Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Ви	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
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Office Use Only



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V HERRING SEP 26 2016

## **COVER LETTER**

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

(PROPOSED CORPO	RATE NAME – <u>MUST IN</u>	CLUDE SUFFIX)		
nd one (1) copy of the Arti	cles of Incorporation and	a check for :		
■ \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fce & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate  PY REQUIRED		
Colette Keno Name (Printed or typed)				
615 SE 9th St Address				
		-		
	nd one (1) copy of the Arti  \$78.75 Filing Fee & Certificate of Status  Colette Keno  Nam 615 SE 9th St  Ft. Lauderdale, Florida 33316	Filing Fee & Certificate of Status  ADDITIONAL CO  Colette Keno  Name (Printed or typed)  615 SE 9th St		

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

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

Daytime Telephone number

ckeno@bcsftl.org



## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 14, 2016

COLETTE KENO 615 SE 9TH STREET FT. LAUDERDALE, FL 33316

SUBJECT: SMALL SCHOOL ATHLETIC LEAGUE

Ref. Number: W16000063408

We have received your document for SMALL SCHOOL ATHLETIC LEAGUE and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 316A00019539

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

615 SE _F4	Principal street address:			
			Mailing address, if different is:	
	. Lauderdale, FC 333	16	A	
	which the corporation is organized is:		league for the school that are small and d	
				. <u>.</u>
<u> </u>				
ARTICLE IV			ectors are elected and appointed: By vote	
ARTICLE V	INITIAL OFFICERS AND/OR DIRE  Jennifer Diaz/ President		Colette Keno/Vice President/Treasury	
Name and Title: Address	12401 Stirling Rd	Name and Title Address:	615 SE 9th St	
	<del></del>	71001055.		
	Ft. Lauderdale , FL 33330		Ft. Lauderdale, Fl 33316	400
	Shawn Barnhardt/ Vice President	Name and Title	Ft. Lauderdale, Fl 33316	) SE
Name and Title:	Shawn Barnhardt/ Vice President	Name and Title	32.	FILE SEP 26
Name and Title:	Shawn Barnhardt/ Vice President		SEE.	FILED SEP 26 PM
Name and Title: Address	Shawn Barnhardt/ Vice President 5451 Davie Rd	Address:	SEE.	SEP 26 PH 5: 45

	. '	Name and Title:	
Address			
			<del>FILED</del>
v			2016 SEP 26 PM 5: 45
Name and Title:		Name and Title:	TALLAHASSEE, FLORIDA
			TALLAHASSEE, FLURIDA
			•
		<del></del>	
<del></del>		<del></del>	
ADMIGNETIC D			
	E <i>GISTERED AGENT</i> <u>ida street address</u> (P.O. Box NOT accep	otable) of the registered	agent is:
Name:	Cheryl Macgillivray		
Address:	1009 SE 6th Ct	<del></del>	
Addiess,	Ft. Lauderdale, Fl 333	310	
ARTICLE VII I. The name and add	NCORPORATOR ress of the Incorporator is:		
Name:	Brian Keno		
Address:	2449 NE 26th Terrace		
11001000	Ft. Lauderdale, FL 33	305	
ARTICLE VIII E	FFECTIVE DATE: Q/20/20	16	
Effective date, if of	FFECTIVE DATE: her than the date of filing: 8/30/20 he is listed, the date must be specific an	d cannot be more that	(OPTIONAL) n five business days prior or 90 business days
after the filing.)	o is instead one date indicate the appeared an		
	serted in this block does not meet the ap the date on the Department of State's reco		requirements, this date will not be listed as the
certificate, I am fai	niliar with and accept the appointment a	s registered agent and a	ve stated corporation at the place designated in this agree to act in this capacity
(Y)	D 1/2-		8-30-16 Date
- CANA	Required Signature of Registered	Agent	Date
I submit this docum	ent and affirm that the facts stated here	in are true. I am aware	that any false information submitted in a document
to the Bepartment	of State constitutes a third degree felony	as provided for in s.817	(.155, F.S. / / . /
· /):	4		8/30//6
	Required Signature of Incorp	porator	Date