

118000009432

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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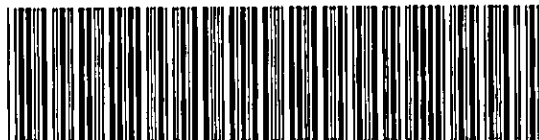
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FILED  
2018 AUG 23 PM 4: 03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 3, 2018

JASPER STARKS  
P.O. BOX 9131  
FORT LAUDERDALE, FL 33310

SUBJECT: MIAMI SAINTS  
Ref. Number: W18000070660

We have received your document for MIAMI SAINTS 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. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.  
<http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/>

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.

Tyrone Scott  
Regulatory Specialist II  
New Filings Section

Letter Number: 918A00015985

CEI  
3 AUG 23 10:19 AM  
FBI

## COVER LETTER

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

SUBJECT: MIAMI SAINTS, 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: JASPER STARKS  
Name (Printed or typed)

P.O. Box 9131  
Address

FL, Lauderdale, FL 33310  
City, State & Zip

(305) 610-9128  
Daytime Telephone number

JAZZ - 87 SAINT@YAHOO.COM  
E-mail address: (to be used for future annual report notification)

**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: miamisaints, inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

17721 NW 14th place  
Miami, Gardens FL 33169

Mailing address, if different is:

P.O. Box 9131  
Ft. Lauderdale, FL 33310

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Football organization

2018 AUG 23 PM 4:00  
SECRETARY OF  
TALLAHASSEE, FLORIDA

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: voted

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

Name and Title: Jasper Starks - P  
Address: P.O. Box 9131  
Ft Lauderdale FL 33310

Name and Title: Javens Williams - CEO  
Address: P.O. Box 9131  
Ft. Lauderdale FL 33310

Name and Title: Samuel Cromer - GM  
Address: P.O. Box 9131  
Ft Lauderdale FL 33310

Name and Title: Crystal Everett - S  
Address: P.O. Box 9131  
Ft Lauderdale, FL 33310

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
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: Jasper Starks

Address: 17721 NW 14<sup>th</sup> place  
Miami, Gardens FL 33169

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Jasper Starks

Address: 17721 NW 14<sup>th</sup> place  
Miami, Gardens FL 33169

**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 days prior or 90 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:*

\_\_\_\_\_  
Required Signature of Registered Agent

8/20/2018  
Date

*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.*

\_\_\_\_\_  
Required Signature of Incorporator

8/20/2018  
Date