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SECRETARY OF STAIL



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.

Regulatory Specialist II
New Filings Section

Letter Number: 918A00015985

## **COVER LETTER**

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

SUBJECT:	MIAM	STGIAS 1	NC	
- -	1.	(PROP	SED C	ORPORATE NAME – <u>MUST INCLUDE SUFFIX</u> )

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

Ft, Lauderdale, FL 33310

(305)610 - 9128
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.

## ARTICLES OF INCORPORATION

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

The name of the corporation shall be: MIRMISRINTSING.					
ARTICLE II PRINCIPAL OFFICE					
Principal <u>street</u> address: 17721 NW 14th Place		Mailing address, if different is: P.O. BOX 9131			
<u> Miami, Gardens</u> FL 33	169	Ft. Lauclerclale, FL 33310			
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	ootball	organization			
		7 5 20 E			
	<del>-</del> -	AHE AK			
ARTICLE IV MANNER OF ELECTION The manner  ARTICLE V INITIAL OFFICERS AND/OR DIRECTO		ectors are elected and appointed: Voted			
Name and Title Jasper Starks - P	Name and Title	Tavens Williams-CEO			
7 7 20 CO	Address:	P.O. BOX 9131			
Ft Lauderdale FL 3330		Ft. Lauderdale FL 33370			
Name and Title: Samuel Cromer - GM	Name and Title	: Crystal EvercH-S			
Address P.O. Box 913)					
Ft Lauderdale FL 33310		Ft Lauderdale, FL 38310			
Name and Title:	Name and Title				
Address	Address:				
		<del></del>			

The name and address of the Incorporator is:  Name: JOSPEY STOPS  Address: Mall NW 14th Place  MILLIM ; Gaydens FL 33/149  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 neet 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 napied as registered agent to accept service of process for the above stated corporation at the place designated in the certificate, I am familiar with applications are gistered agent and agree to act in this capacity  Required Signature of Registered Agent  Journal of the facts stated herein are true. I am aware that any false information submitted in a document of the contraction of the facts stated herein are true. I am aware that any false information submitted in a document of the contraction of the contract	Name and Title:	Name and Title:
Address Address:  ARTICLE VI INCORPORATOR  The name and address of the Incorporator is:  Name:  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Name:  Address:  Mame:  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Name:  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Name:  ARTICLE VIII EFFECTIVE DATE:  Effective date if other than the date of filing:  (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 neet 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 the certificate. I am familiar with appl accept the appointment as registered agent and agree to act in this capacity  Required Signature of Registered Agent  Address:  8 20 20 18	Address	Address:
Address Address:  ARTICLE VI INCORPORATOR  The name and address of the Incorporator is:  Name:  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Name:  Address:  Mame:  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Name:  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Name:  ARTICLE VIII EFFECTIVE DATE:  Effective date if other than the date of filing:  (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 neet 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 the certificate. I am familiar with appl accept the appointment as registered agent and agree to act in this capacity  Required Signature of Registered Agent  Address:  8 20 20 18	· · · · · · · · · · · · · · · · · · ·	
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ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name: JOSPER STARKS.  Address: 1772   NIW 14 <sup>th</sup> POCC  HIGM   GARDENS 133409  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Name: JOSPER STARKS.  Address: Mal NW 14 <sup>th</sup> POCC  MIMM   GARDENS FL 33109  ARTICLE VIII INCORPORATOR  The name and address of the Incorporator is:  Name: JOSPER STARKS.  Address: Mal NW 14 <sup>th</sup> POCC  MIMM   GARDENS FL 33109  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 the certificate. I am familian with upd accept the appointment as registered agent and agree to act in this capacity  Required Signature of Registered Agent  Abbril this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a docume to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.  8 20 2018	isame and Title:	Name and Title:
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name: JBSPCY STARKS  Address: 17721 NIW 14th PACL  HIGHL HIGHL HIGHL HIGHL HIGHL HIGHL HIGH HIGH	Address	Address:
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name: JBSPCY STARKS  Address: 17721 NIW 14th PACL  HIGHL HIGHL HIGHL HIGHL HIGHL HIGHL HIGH HIGH		
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ARTICLE VII INCORPURATOR The name and address of the Incorporator is:  Name: JOSTEV STUKS  Address: 17721 NW 14 <sup>th</sup> Place  MILLIMITY GAYDENS FL 331UG  ARTICLE VIII EFFECTIVE DATE:  Effective date if other than the date of filing: (OPTIONAL)  (Iff 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 neet 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 the certificate. I am familitar with apply accept the appointment as registered agent and agree to act in this capacity  Required Signature of Registered Agent  Joshmit 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.  8 20 2018		
ARTICLE VII INCORPURATOR  The name and address of the incorporator is:  Name:  JASQEV STAPKS  Address:  Address:  MILMI; Gaydens FL 33/VG  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 neet 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 napsed as registered agent to accept service of process for the above stated corporation at the place designated in the certificate. I am familiar with appl accept the appointment as registered agent and agree to act in this capacity  Required Signature of Registered Agent  John 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.  8 20 2018	Name: Usper S	tarks
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Name: JOSOCY STOYKS  Address: MIND 14Th Place  MIND: Gardens Fe 33/VG  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 napsed as registered agent to accept service of process for the above stated corporation at the place designated in the certificate. I am familiar with applications are registered agent and agree to act in this capacity.  Required Signature of Registered Agent  Joshmit 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.  8 20 2018	Address: 17721 NV	14th place
Name: JOSPEY STORKS  Address:	Miami, Gra	dens Fl3=169
Name: JOSPEY STUKES  Address: 1721 NW 14th Place  MIMM; Gaydens Fe 33/109  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 neet 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 the certificate. I am familiar with and accept the appointment as registered agent and agree to act in this capacity.  Required Signature of Registered Agent  Joulinit 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.		
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ARTICLE VIIIEFFECTIVE DATE:  Effective date. if other than the date of filing:	Name: JUSTEP S	<u>UrKS</u>
Effective date, if other than the date of filing:	Address: 17721 Nu	141 place
Effective date, if other than the date of filing:	<u>Miami, G</u>	Irdens FL 33/69
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Required Signature of Incorporator  8 20 2018  Date	w ine vepariment of state constitutes a	· 1
Required Signature of Incorporator Date		8 20 2018
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