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Florida Department of State
Division of Corporations
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SECOND SUBMISSION

To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : INCORPORATING SERVICES FL
Account Number : 120050000052
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Email Address: David@whitelabelliquid.com

FLORIDA PROFIT/NON PROFIT CORPORATION
Lakewood Ranch Titans Baseball Team, Inc.

Certificate of Status	0
Certified Copy	1
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FILED
19 FEB 25 AM 9:10
TALLAHASSEE, FLORIDA

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(2/4) 02/25/2019 02:18:07 PM -0500

850-617-8381

2/25/2019 9:20:24 AM PAGE 1/001 Fax Server



February 25, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

INCORPORATING SERVICES FL

SUBJECT: LAKEWOOD RANCH TITANS BASEBALL TEAM, INC.
REF: W19000018455

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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FAX Aud. #: B19000062089
Letter Number: 219A00003899

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ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: Lakewood Ranch Titans Baseball Team, Inc.**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address:
16011 Foremast Place

Mailing address, if different is:

Lakewood Ranch, FL 34202**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: exclusively for charitable and educational purposes, including sponsorship of youth baseball team, including, for such purposes, the making of distributions to organizations that qualify as exempt organization under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: _____
as provided in Bylaws**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:	<u>Neil Hunn - Director</u>	Name and Title:	<u>Kevin West - Director</u>
Address	<u>16011 Foremast Place</u>	Address:	<u>14107 18th Place East</u>
	<u>Lakewood Ranch, FL 34202</u>		<u>Bradenton, FL 34212</u>

Name and Title:	<u>Denise West - Director</u>	Name and Title:	_____
Address	<u>14107 18th Place East</u>	Address:	_____
	<u>Bradenton, FL 34212</u>		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____

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Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

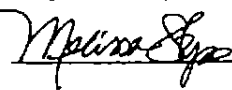
ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:Name: Incorporating Services, Ltd.Address: 1540 Glenway DriveTallahassee, FL 32301**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: Susan Morasci c/o King & Spalding LLPAddress: 601 S. California Ave., Ste. 100Palo Alto, CA 94304**ARTICLE VIII EFFECTIVE DATE:** 2/22/2019

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

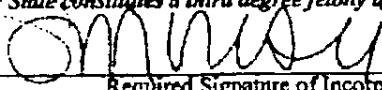


Required Signature of Registered Agent

2/22/2019

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.



Required Signature of Incorporator

02/22/2019

Date

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