

N2D 000 001 564

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

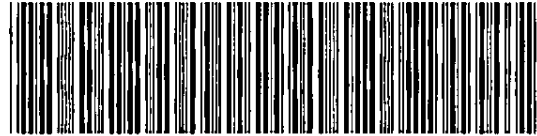
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300339408643

01/22/20--01022--033 **78.75

COVER LETTER

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

SUBJECT: Cubs That Roar 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: Robert Garth
Name (Printed or typed)

7202 Wedgewood
Address

Jacksonville, FL, 32244
City, State & Zip

904-517-9106
Daytime Telephone number

Cubsthatroar@gmail.com
E-mail address: (to be used for future annual report notification)

FILED
2020 JAN 22 PM 3:51
SECRETARY OF STATE
TALLAHASSEE, FL

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: Cubs That Roar INC

ARTICLE II PRINCIPAL OFFICE

Principal street address:
7202 Wedgewood

Jacksonville, FL 32244

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The purpose for which the corporation is organized is: exclusively for charitab
purposes to promote amateur sports under 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal
tax code. According to Sports and Fitness Industry Association and the Aspen Institute, youth sports continues to decline with
skyrocketing costs being major factor. Our Mission is to empower all youth to achieve more and pursue greatness in all aspects
of life through sports camps, clinics, training, and mentorship programs regardless of their economical and social backgrounds.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Newly appointed

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Robert Garth- President

Address: 7202 Wedgewood
Jacksonville, FL 32244

Name and Title: Charles Allsup- Vice President

Address: 653 Sweet Orange Terrace
Saint Augustine, FL 32092

Name and Title: Angela Stevens- Treasurer

Address: 249 Taylor Ridge
Ponte Vedra FL
32801

Name and Title: Sean McClafferty- Trustee

Address: 644 Battlegate LN
Ponte Vedra Beach FL, 32801

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FL

2020 JAN 22 PM 3:51

FILED

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: Robert Garth _____

Address: 7202 Wedgewood _____

Jacksonville FL. 32244 _____

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Robert Garth _____

Address: 7202 Wedgewood _____

Jacksonville FL. 32244 _____

FILED
2020 JAN 22 PM 3:51
SECRETARY OF STATE
TALLAHASSEE, FL

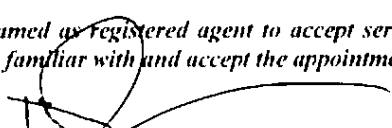
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01/13/2020 (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:

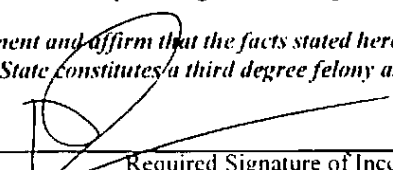


Required Signature of Registered Agent

01/13/2020

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

01/13/2020

Date