

N21000005698

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

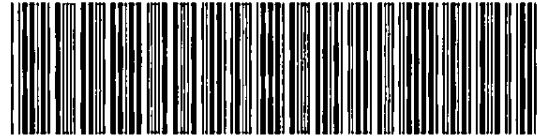
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

SUBJECT: THUNDER-N-LIGHTING SPORTS FITNESS, 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: JOHNNY AULS

Name (Printed or typed)

2781 NW 16TH COURT

Address

Fort Lauderdale, FL 33311

City, State & Zip

954-588-0768

Daytime Telephone number

mowfitness@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)

2021 APR 25 11:10:05

ARTICLE I NAME
The name of the corporation shall be: THUNDER-N-LIGHTNING SPORTS FITNESS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
2781 NW 16TH COURT
Fort Lauderdale, FL 33311

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
THUNDER-N-LIGHTNING SPORTS FITNESS, INC. IS COMMITTED TO PROVIDING OPPORTUNITIES FOR YOUTH
AGES ELEVEN THROUGH EIGHTEEN TO ENGAGE IN HEALTHY LIVING AND LIFE STYLE CHOICES THROUGH
MENTORSHIP, CONSULTING AND SPORTS FITNESS TRAINING.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: AS PER BYLAWS.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Johnny Auls/CEO</u>	Name and Title:	<u>Traleki Auls/VP</u>
Address	<u>2781 NW 16TH Court</u> <u>Fort Lauderdale, FL 33311</u>	Address:	<u>2781 NW 16TH Court</u> <u>Fort Lauderdale, FL 33311</u>
Name and Title:	<u>Larae Dash/SEC</u>	Name and Title:	<u>Darlene Ricks/Treasurer</u>
Address	<u>3970 NW 33RD Terrace</u> <u>Lauderdale Lakes, FL. 33309</u>	Address:	<u>3970 NW 33RD Terrace</u> <u>Lauderdale Lakes, FL 33309</u>
Name and Title:	<u>James Lawrence/Board MBR</u>	Name and Title:	
Address	<u>3301 VIRGINIA AVENUE</u> <u>West Mifflin, PA. 15122</u>	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: TRALEKI AULS

Address: 2781 NW 16TH COURT

Fort Lauderdale, FL 33311

ARTICLE VII INCORPORATOR

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

Name: JOHNNY AULS

Address: 2781 NW 16TH COURT

Fort Lauderdale, FL 33311

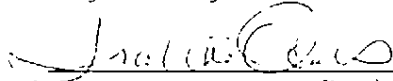
ARTICLE VIII EFFECTIVE DATE:

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

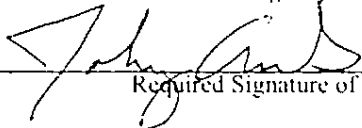


Required Signature of Registered Agent

4-1-2021

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

4-1-2021

Date