

N22000002543

(Requestor's Name)

(Address)

(Address)

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☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

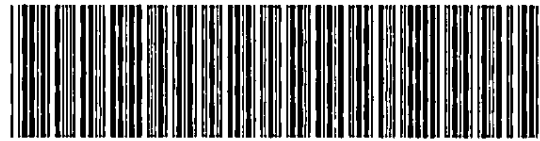
Special Instructions to Filing Officer:

3/14/22

Office Use Only

W22000026082

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FILED

CLERK



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 1, 2022

DEBORAH GAMBLE
160 W. CAMINO REAL #1026
BOCA RATON, FL 33432

SUBJECT: DEB'S MMA CLOSET
Ref. Number: W22000026082

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.

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

If you have any further questions concerning your document, please call (850) 245-6052.

Coates Brianna
OPS Clerk
New Filings Section

Letter Number: 022A00004971

SD
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FLORENCE

COVER LETTER

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

SUBJECT: Deb's MMA Closet 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: Deborah Gamble
Name (Printed or typed)

160 W. Camino Real
Address 1

#F1026

Boca Raton, Fla 33432
City, State & Zip

561-914-9690
Daytime Telephone number

info@debsmmaclaset.com or
E-mail address: (to be used for future annual report notification)

Mma1samazingdeb@gmail.com

NOTE: Please provide the original and one copy of the articles.

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LED

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

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

Principal street address: 160 W Camino Real 160 W. Camino Real
#1026 Boca Raton Fla, #1026 Boca Raton Fla,
33432 33432

The purpose for which the corporation is organized is:

The purpose for which the corporation is organized is: MMA is a sport that empowers and strengthens the will of all those who are willing to learn and do the work. MMA has changed so many lives for the better. Our mission at Deb's MMA Closet^{Inc.} is to provide opportunities and guidance for underprivileged kids and adults of all backgrounds to learn this transformational art of self-reliance. Also anyone who has a passion for this sport.

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

Picked by the CEO and appointed to them to all the meetings.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jara Gamble/Chair person

Address 160 W. Camino Real
#1026 Boca Raton
Fla. 33432

Name and Title: Deborah Gamble / CEO - Sec

Address: 160 W. Camino Real
1026 Boca Raton Fla,
33432

Name and Title: Hiliana Gamble

Name and Title: _____

Address 160 W. Camino
Real #1026 Boca
Raton Fl. 3343

Address: _____

Name and Title: _____

Name and Title: _____

Address

Address: _____

SECRET

... ..

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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:

Deborah Gamble

Address:

160 W. Camino Real #1026
Boca Raton, FL 33432

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Deborah Gamble

Address:

160 W. Camino Real #1026
Boca Raton Fla, 33432

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

Deborah Gamble

Required Signature of Registered Agent

02/05/2022
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.

Deborah Gamble

Required Signature of Incorporator

02/05/2022
Date



FLORIDA
DEPARTMENT OF STATE

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ED