

Feb. 9, 2023 9:25AM

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Division of Corporations

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Response

**N23000001360**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : GREEN BOX TAX SERVICES INC  
Account Number : 110190000123  
Phone : (305)928-1137  
Fax Number : (726)349-4952

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: lionheartbaseballmiami@gmail.com

FLORIDA PROFIT/NON PROFIT CORPORATION  
LION HEART BASEBALL ACADEMY CORP

Certificate of Status	0
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Estimated Charge	\$70.00

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Corporate Filing Menu

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February 2, 2023

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

GREEN BOX TAX SERVICES INC

SUBJECT: LION HEART BASEBALL ACADEMY CORP  
REF: W23000014203

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 purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the non profit corporation is being organized.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Three directors must be listed for a non-profit entity.

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

DANIEL L O'KEEFE  
Regulatory Specialist II

FAX Aud. #: H23000041216  
Letter Number: 223A00002556

Patrick Lovely

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**ARTICLES OF INCORPORATION**  
In compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be: Lion Heart Baseball Academy Corp

**ARTICLE II PRINCIPAL OFFICE**

Principal ~~street~~ address:  
14225 sw 107ct Miami, Fl 33176

Mailing address, if different is:  
14225 sw 107ct Miami, Fl 33176

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

Will entirely be used to operate a youth sports academy and give back to the community.

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

Vote, each board member has 1 vote. All decisions, including the election of directors are decided by majority vote

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Sandra Rojas - President

Name and Title: \_\_\_\_\_

Address: 14225 sw 107ct  
Miami, Fl 33176

Address: \_\_\_\_\_

Name and Title: Asis Cummings - Vice President

Name and Title: \_\_\_\_\_

Address: 14225 sw 107ct  
Miami, Fl 33176

Address: \_\_\_\_\_

Name and Title: Patrick Lovely- Chairman

Name and Title: \_\_\_\_\_

Address: 2674 SE 14 ST  
Homestead, Fl 33035

Address: \_\_\_\_\_

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H 230 000 412 163

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: Atesiano Tax Services

Address: 15715 S Dixie Hwy ste 211

Miami, FL 33157

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Asis Cummings

Address: 14225 SW 107 CT

Miami, FL 33176

**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

02/08/2023

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

02/08/2023

Date