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To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INTERNET SERVICES

FLORIDA PROFIT/NON PROFIT CORPORATION
LHB BASEBALL INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	$78.75

S. CHATHAM

APR 27 2022

Electronic Filing Menu Corporate Filing Menu Help

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: LHB - Baseball INC

ARTICLE II PRINCIPAL OFFICE

Principal street address:

10 CANAL ST MIAMI SPRINGS

FL 33166

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Baseball Academy Providing bats Gloves, uniforms & other items used in the sport.

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

By the Bylaws

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TALLAHASSEE, FLORIDA

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: PRESIDENT

Address 10 CANAL ST
MIAMI SPRINGS
FL 33166

Name and Title: Eisler Livan

Address: HERNANDEZ

Name and Title:

Address

Name and Title:

Address:

Name and Title:

Address

Name and Title:

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: EISLER LIVAN Hernandez

Address: 10 Canal ST

Miami Springs FL 33166

ARTICLE VII INCORPORATOR

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

Name: Eisler Livan Hernandez

Address: 10 CANAL ST

MIAMI SPRINGS FL 33166

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TALLAHASSEE, FLORIDA

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

X _____

Required Signature of Registered Agent 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.

X _____

Required Signature of Incorporator Date