

# N230000014514

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

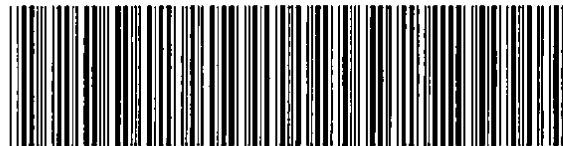
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FL

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 14, 2023

JEFFREY M. BACKO  
13801 TAMiami TRAIL, STE D  
NORTH PORT, FL 34287 US

SUBJECT: MISSIONS ON THE MAT, INC.  
Ref. Number: W23000126023

2023 OCT 18 PM 1:50

RECEIVED

MISSIONS  
ON THE MAT  
INC.

We received your online transmitted document. However, the document has not been filed for the following:

The document does not meet the minimum number of director's requirement. According to Florida Statute 617.0803 a board of directors must consist of three or more individuals.,

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

Crystal S Hightower  
Regulatory Specialist II  
CoT

Letter Number: 623A00021

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TALLAHASSEE, FL

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## COVER LETTER

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

**SUBJECT:** Missions on the Mat, 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:** Jeffrey M. Backo

\_\_\_\_\_  
Name (Printed or typed)

13801 Tamiami Trail, Ste D

\_\_\_\_\_  
Address

North Port FL 34287

\_\_\_\_\_  
City, State & Zip

941-426-1193

\_\_\_\_\_  
Daytime Telephone number

jeff@northportlaw.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)

**ARTICLE I NAME**

The name of the corporation shall be: Missions on the Mat, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
1050 Innovation Avenue, #109

North Port FL 34289

Mailing address, if different is:  
P.O. Box 7437

North Port FL 34290

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: charitable, educational, or religious, within the meaning of Section 501(c)(3)  
of the IRS Code of 1986, as amended, and to reach the community for Jesus through the art of Jiu-Jitsu.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed: elected by a majority

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

1  
Name and Title: Kevin Charles Llewellyn, President, DIR

Address: 20219 Lagnete Circle  
Venice FL 34293

2  
Name and Title: Christopher Michael Ritchie, VP, DIR

Address: 1054 S. Narramore Street  
North Port FL 34287

3  
Name and Title: Jason Antero Sierra Couvertier, DIR

Address: 6590 Lapidus Road  
North Port FL 34291

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

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

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

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

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

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

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CLERK OF DISTRICT COURT  
TALLAHASSEE, FL

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
 Address: \_\_\_\_\_ Address: \_\_\_\_\_  
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 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: Jeffrey M Backo  
 Address: 13801 Tamiami Trail Ste D  
 North Port FL 34287

**ARTICLE VII INCORPORATOR**

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

Name: Kevin Charles Llewellyn  
 Address: 20219 Lagente Circle  
 Venice FL 34293

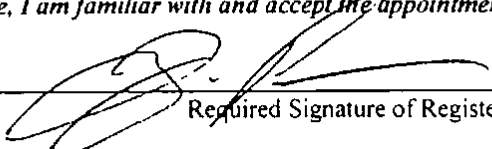
**ARTICLE VIII EFFECTIVE DATE:**

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

8/17/23  
 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

8/17/23  
 Date

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 SECRETARY OF STATE  
 TALLAHASSEE, FL

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

UNDER THE PROVISIONS OF F.S. 607.0501, THE UNDERSIGNED CORPORATION,  
ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE  
FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED  
OFFICE/REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the corporation is: Missions on the Mat, Inc.
2. The name and address of the registered agent and office is:

Jeffrey M. Backo  
13801 Tamiami Trail Suite D  
North Port, FL 34287

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2023 AUG 21 AM 8:23  
SECRETARY OF STATE  
TALLAHASSEE, FL

Having been named as registered agent and to accept service of process for the above-named corporation at the place designated in this certificate, I accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

  
Jeffrey M. Backo

Attorney