

N 24000005247

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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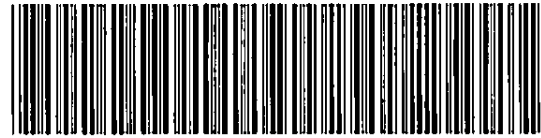
(Business Entity Name)

(Document Number)

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

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TALLAHASSEE, FL

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

**SUBJECT:** SARASOTA FOOTBALL, 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: SHANNON ROSIER  
Name (Printed or typed)

\*\*\*WILL PICK UP\*\*\*

\_\_\_\_\_  
Address

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

850-510-4415

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

shannon@rosierco.com

E-mail address: (to be used for future annual report notification)

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

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TALLAHASSEE, FL  
DIVISION OF STATE

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

**ARTICLE I NAME**

The name of the corporation shall be: SARASOTA FOOTBALL, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
1763 33rd St

Sarasota, FL 34234

Mailing address, if different is:  
PO Box 16375

Tallahassee, FL 32317

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Any and all lawful business in the State of Florida.

Promote and educate high school athletes to be prepared for college and receive college scholarships.

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

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

Name and Title: Amp Cambell, Executive Director

Address: 1763 33rd St  
Sarasota, FL 34234

Name and Title: Greg Buchanan, President

Address: 6267 38th St E  
Bradenton, FL 34203

Name and Title: Eddie Howell, Vice President

Address: 2639 Mapeloft Ln  
Sarasota, FL 34232

Name and Title: Matt Cannon, Secretary

Address: 1240 Fox Creek Dr  
Sarasota, FL 34240

Name and Title: Shannon Rosier, Treasurer

Address: 1882 Capital Cir NE Ste 102  
Tallahassee, FL 32308

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

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

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CLERK OF STATE  
TALLAHASSEE, FL

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: SHANNON ROSIER

Address: 1882 CAPITAL CIR NE STE 102

TALLAHASSEE, FL 32308

**ARTICLE VII INCORPORATOR**

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

Name: Shannon Rosier

Address: 1882 Capital Cir NE Ste 102

Tallahassee, FL 32308

**ARTICLE VIII EFFECTIVE DATE:** 05/01/2024

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

Shannon Rosier  
Required Signature of Registered Agent

05/01/2024  
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.

Shannon Rosier  
Required Signature of Incorporator

05/01/2024  
Date

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TALLAHASSEE FL  
DEPT OF STATE