# 805100UD

| (Requestor's Name)                      |
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# **CT CORP**

### (850) 656-4724 3458 lakesore Drive Tallahassee, FL 32312

| Da   | ote: 06/17/2024            | 00072 4: CDW   |
|--|----------------------------|--|
|  | Acc#I201600                | 00072 GO: C J W  |
| Name:  | Soccer Community of Lake   | Nona, Inc  |
| Document #:  |                            |  |
| Order #:   | 15651155 - 1               |  |
| Certified Copy of Arts<br>& Amend:<br>Plain Copy:<br>Certificate of Good<br>Standing:<br>Certified Copy of |                            | 2024 JUN 17 A  |
| Apostille/Notarial<br>Certification:   | Country of Destin          | ation:   |
| Filing: 🚺  | Certified:   Plain:  COGS: | Email Address for Annual Report Notifications helen.cooper@dentons.com |
| Availability  Document  Examiner  Updater  Verifier  W.P. Verifier  Ref#                                   | Amount: \$ 78.75           |  |

Thank you!

# **COVER LETTER**

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

|                          | (PROPOSED CORP                             | ORATE NAME – <u>MUST IN</u>          | CLUDE SUFFIX)                                   |
|--------------------------|--|--------------------------------------|---|
| nclosed is an original a | and one (1) copy of the Ar                 | ticles of Incorporation and          | a check for :                                   |
| □ \$70.00<br>Filing Fee  | \$78.75 Filing Fee & Certificate of Status | □\$78.75 Filing Fee & Certified Copy | S87.50 Filing Fee, Certified Copy & Certificate |
|                          |  | ADDITIONAL COPY REQUIRED             |   |
| FROM:                    | Helen V. Cooper, Esq.                      | me (Printed or typed)                | PPY REQUIRED THAN SSEE, FLAT                    |
|                          | 3500 PNC Tower, 101 South Fifth Street     |                                      | <b>13.7</b>                                     |
|                          | Address                                    |                                      | -   |
|                          | Louisville, Kentucky 40202                 |                                      |   |
|                          | City, State & Zip                          |                                      | -   |
|                          | 502 - 587 - 3507                           |                                      | _   |
|                          | Daytime Telephone number                   |                                      |   |
|                          | helen.cooper@dentons.com                   |                                      |   |

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

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

| The name of the   | NAME e corporation shall be:  Soccer Commit  | unity of Lake Nona, Inc.   |
|---|--|--|
| ARTICLE II  | PRINCIPAL OFFICE   |  |
| 12314   | Principal <u>street</u> address:<br>4 Suttner Avenue                               | Mailing address, if different is:  |
| Orlan   | do, FL 32827   |  |
| ARTICLE III The purpose fo specialized pro                    | PURPOSE  r which the corporation is organized ogramming, deep-rooted local partner | is: To harness the power of soccer to improve player development through rships, and philanthropic donations in order to empower our members to make |
| a difference on   | and off the field within our local co  | mmunity.   |
| ARTICLE IV  As provided for ARTICLE V  Name and Title Address | INITIAL OFFICERS AND/OR DI   | manner in which the directors are elected and appointed:    Name and Title:   Jean-Damien Ladeuil - Director:     Address:   Orlando, FL 32827       |
| Name and Title:   | 12314 Suttner Avenue   | Name and Title:  Address:  |
| Name and Title  | Orlando, FL 32827  | Name and Title:  Address:  |

| Name and Title:  | Name and Fitle                         |  | Name and Title:  |  | <b>-</b>    |                   |
|--|--|--|--|--|-------------|-------------------|
| Name and Title:    Name and Title:   Address:  | Address                                |  | Address:   |  | -           |                   |
| Address:  Address:  Address:  Address:  Name:  CT Corporation  Address:  I200 South Pine Island Road Plantation, Florida 33324  ARTICLE VII INCORPORATOR The name and address of the Incorporator is:  Name:  Charles Lagayette  Orlando, FL 32827  ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing:  (If an effective date, if other than the date of filing: (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  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.  6/14/2024   | •                                      |  |  |  | -<br>-      |                   |
| ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name: CT Corporation  Address: 1200 South Pine Island Road Plantation, Florida 33324  ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Charles Lagayette  Address: 12314 Suttner Avenue Orlando, FL 32827  ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (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  Lisubmit 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 x817.155, F.S.  6/14/2024  | Name and Title                         | :  | Name and Title:  |  | _           |                   |
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| Name:  Address:    1200 South Pine Island Road Plantation,   1200 South Pine Island Road Pine Islantation,   1200 South Pine Island Road Pine Island Road Pine Isla | ARTICLE VI                             |  | 11 . X . Cale  | :  |             |                   |
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|  |  | ·=-  | •  |  |             |                   |
|  |  | Required Signature of Inc  | corporator   |  |             | _                 |