

NA24000007948

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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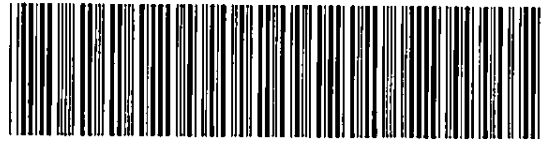
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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7/8/24

2024 JUL 8 AM 5:07
STATE

COVER LETTER

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

SUBJECT: Eagles Edge Youth Sports Academy Corporation

(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: Brian Metzger

Name (Printed or typed)

4967 Lambridge Ct. #101

Address

Palm Harbor, FL 34685

City, State & Zip

727-483-1022

Daytime Telephone number

info@eaglesedgeysa.com

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

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

2007
JUN 5:07
NOTE

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

ARTICLE I NAME

The name of the corporation shall be: Eagles Edge Youth Sports Academy Corporation

ARTICLE II PRINCIPAL OFFICE

Principal street address:
4967 Lambridge Ct. #101

Palm Harbor, FL 34685

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Youth Sports

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Brian Metzger Name and Title: _____

Address: 4967 Lambridge Ct. #101 Address: _____

Palm Harbor, FL 34698

President

Name and Title: Action Accounting Name and Title: _____

Address: 5321 Memorial Hwy, Address: _____

Tampa, FL 33634

Treasurer

Name and Title: Christine Metzger Name and Title: _____

Address: 4967 Lambridge Ct. #101 Address: _____

Palm Harbor, FL 34698

VP

FILED
JAN 5 2017
CLERK OF DISTRICT COURT
JAN 5 2017

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: Brian Metzger

Address: 4967 Lambridge Ct. #101

Palm Harbor, FL 34698

ARTICLE VII INCORPORATOR

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

Name: Brian Metzger

Address: 4967 Lambridge Ct. #101

Palm Harbor, FL 34698

ARTICLE VIII EFFECTIVE DATE: 07/02/2024

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

Brian Metzger

Required Signature of Registered Agent

07/02/2024

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.

Brian Metzger

Required Signature of Incorporator

07/02/2024

Date