

N24 000011118  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H24000318196 3))



H2400031819634BC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From: Account Name : ALLSTATE CORPORATE SERVICES CORP  
Account Number : I20040000031  
Phone : (800)906-9220  
Fax Number : (800)906-9880

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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

FLORIDA PROFIT/NON PROFIT CORPORATION  
NORTH TAMPA LACROSSE, INC.

|                       |         |
|-----------------------|---------|
| Certificate of Status | 1       |
| Certified Copy        | 0       |
| Page Count            | 02      |
| Estimated Charge      | \$78.75 |

RECEIVED

2024 SEP 18 PM 2:49

SECRETARY OF STATE  
TALLAHASSEE, FL

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

**ARTICLE I NAME**

The name of the corporation shall be: North Tampa Lacrosse, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

Mailing address, if different is:

13347 Hillsborough Ave  
Building J, Unit 104  
Tampa, FL 33635

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: A charity designed to aid children who want to play lacrosse and other sports. The non for profit will pursue charitable donations to provide equipment, insurance, supervision, referee and rent to various establishments

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

Elected at the annual meeting

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

Name and Title: Timothy Patrick Rose Name and Title: \_\_\_\_\_

Address: 13347 Hillsborough Ave Address: \_\_\_\_\_  
Building J, Unit 104 \_\_\_\_\_  
Tampa, FL 33635 \_\_\_\_\_

Name and Title: Ethan James Quinlan Name and Title: \_\_\_\_\_

Address: 13347 Hillsborough Ave Address: \_\_\_\_\_  
Building J, Unit 104 \_\_\_\_\_  
Tampa, FL 33635 \_\_\_\_\_

Name and Title: Jenna Rose Quinlan Name and Title: \_\_\_\_\_

Address: 13347 Hillsborough Ave Address: \_\_\_\_\_  
Building J, Unit 104 \_\_\_\_\_  
Tampa, FL 33635 \_\_\_\_\_

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: Timothy Patrick Pease  
Address: 13347 Hillsborough Ave - Building J, Unit 104  
Tampa, FL 33635

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

Name: Timothy Patrick Pease  
Address: 13347 Hillsborough Ave - Building J, Unit 104  
Tampa, FL 33635

**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

[Signature]  
Required Signature of Registered Agent

9/18/24  
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.

[Signature]  
Required Signature of Incorporator

9/18/24  
Date

4772