

11/27/2024 11:39 AM

NB24000013823

Florida Department of State
Division of Corporations
Economic Filing Center Street

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.

((H24000393694 3))



H240003936943ABC7

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 : INCFILE.COM LLC
Account Number : I20220000070
Phone : (888)462-3453
Fax Number : (877)919-2613

Handwritten signature and date: 12/3/24

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

Email Address: EFILE1234@INCFILE.COM

RECEIVED

NOV 27 2024 10:13

DEPT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION
ORLANDO GAYMING LEAGUE INC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

CC:2

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

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

SUBJECT: ORLANDO GAYMING LEAGUE 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: LOVETTE DOBSON
Name (Printed or typed)

17350 STATE HWY 249 #220
Address

HOUSTON, TX 77064
City, State & Zip

888-462-3453
Daytime Telephone number

EFILE1234@INCFILE.COM
E-mail address: (to be used for future annual report notification)

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

CC: ...
...

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

ARTICLE I NAME

The name of the corporation shall be: ORLANDO GAYMING LEAGUE INC

ARTICLE II PRINCIPAL OFFICE

Principal <u>street</u> address:	Mailing address, if different is:
<u>3629 KEYWORTH ST</u>	<u>3629 KEYWORTH ST.</u>
<u>APOPKA, FLORIDA 32712</u>	<u>APOPKA, FLORIDA 32712</u>
<u>ORANGE</u>	<u>ORANGE</u>

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

To create an inclusive gaming social club for the orlando lgbtqia+ community and its allies.

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Cuomo Lombardi Derrick (DIRECTOR)</u>	Name and Title: <u>Herrera Isaac (DIRECTOR)</u>
--	---

Address: <u>248 Prairie Dune Way.</u>	Address: <u>6025 Edgebrook Dr.</u>
<u>Orlando FL 32828</u>	<u>Orlando FL 32809</u>

Name and Title: <u>Brown David (DIRECTOR)</u>	Name and Title: <u>Torres Marc (DIRECTOR)</u>
---	---

Address: <u>1349 Captiva Cv.</u>	Address: <u>2797 Ponds Trl.</u>
<u>Sanford FL 32771</u>	<u>Saint Cloud FL 34769</u>

Name and Title: _____	Name and Title: _____
-----------------------	-----------------------

Address: _____	Address: _____
----------------	----------------

11/27/2024 11:45:12 CST

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: JOHAN COLON SANCHEZ
Address: 3629 KEYWORTH ST
APOPKA 32712

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: LOVETTE DOBSON
Address: 17350 STATE HWY 249 #220
HOUSTON, TX 77064

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:

Johan Colon Sanchez 11/27/2024
Required Signature of Registered Agent 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.

Lovette Dobson 11/27/2024
Required Signature of Incorporator Date

2024 NOV 27 11:45 AM

