

TRANSMITTAL LETTER

PO0000007213

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

SUBJECT: UNITED STATES Professional Tennis Instruction USPTI
(Proposed corporate name - must include suffix)

300003092053--9
-01/07/00--01084--007
*****70.00 *****70.00

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 of Status

ADDITIONAL COPY REQUIRED

FROM: MARC Monpoint
Name (Printed or typed)
12246 NW 25th CT
Address
CORAL Springs FL 33065
City, State & Zip
954-757-2866
Daytime Telephone number

FILED
00 JAN 24 AM 11:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W 1225

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

R. VARNADORE JAN 24 2000



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

January 14, 2000

MARC MOMPOINT
12246 NW 25TH CT
CORAL SPRINGS, FL 33065

SUBJECT: UNITED STATES PROFESSIONAL TENNIS INSTRUCTOR PA
Ref. Number: W00000001225

We have received your document for UNITED STATES PROFESSIONAL TENNIS INSTRUCTOR PA and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Corporations may file using only the corporate name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing the enclosed application and submitting the appropriate fees to this office.

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

The PA suffix can only be used with state licensed professionals i.e., doctors, lawyers, accountants etc. PLEASE CLARIFY the name you want to use. You have "instruction" on the transmittal letter and "instructor" on the articles.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6923.

RoseAnn Varnadore
Corporate Specialist Supervisor

Letter Number: 200A00002114

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

United States Professional Tennis
INSTRUCTION INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

12246 NW 25th Court
Coral Springs FL 33065

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 shares of common stock having a par value of 1 dollar. The stock is deemed Section 1244 stock as per IRS regulations.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

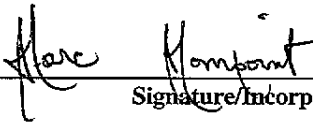
The name and Florida street address of the initial registered agent are:

MARC mompoint
12246 NW 25th CT
Coral Springs FL 33065

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

MARC mompoint
12246 NW 25th CT
Coral Springs FL 33065

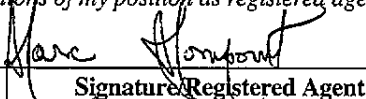

Signature/Incorporator

01-04-2000

Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent


Signature/Registered Agent

01-04-2000

Date

FILED
00 JAN 24 AM 11:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA