

**Power 38723**

OFFICE ONLY  
**EXPRESS CORPORATE FILING SERVICE INC**  
 (Requestor's Name)

**1000 PONCE DE LEON BLVD. STE. 112**  
 (Address)

**CORAL GABLES, FLORIDA 33134**  
 (City, State, Zip)

**(305) 444-4994** **(305) 444-4977**  
 (Phone#) (FAX#)

OFFICE USE ONLY

**CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):**

1. **Fantasy Team, Inc.**  
 (Corporation Name) (Document #)
2. \_\_\_\_\_  
 (Corporation Name) (Document #)
3. \_\_\_\_\_  
 (Corporation Name) (Document #)
4. \_\_\_\_\_  
 (Corporation Name) (Document #)

- ☐ Walk in 
 ☒ Pick up time 
 ☒ Certified Copy  
☐ Mail out 
 ☐ Will wait 
 ☐ Photocopy 
 ☐ Certificate of Status

**RECEIVED**  
 00 APR 18 AM 10:39  
 DEPT. OF STATE  
 DIVISION OF CORPORATIONS  
 TALLAHASSEE, FLORIDA

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

**FILED**  
 00 APR 18 PM 1:13  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**500003212565--5**  
 -04/18/00--01054--006  
 \*\*\*\*\*78.75 \*\*\*\*\*78.75

Examiner's Initials	
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**ARTICLES OF INCORPORATION**  
**FOR**  
**FANTASY FOAM, INC.**

FILED  
00 APR 18 PM 1:13  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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:

FANTASY FOAM, INC.

**ARTICLE II PRINCIPAL OFFICE**

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

8741 S.W. 158th PL  
MIAMI, FL 33193

**ARTICLE III SHARES**

The number of shares of stock that this corporation is authorized to have shall be:

SHARES: 100 @ \$1.00

**ARTICLE IV REGISTERED AGENT**

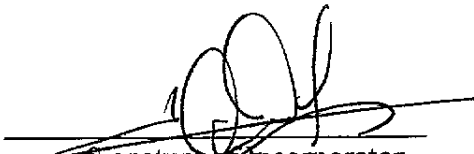
The name and Florida street address of the initial registered agent shall be:

IHOSVANY DIAZ  
8741 S.W. 158 PL  
MIAMI, FL 33193

**ARTICLE V INCORPORATOR**

The name(s) and address(es) of the incorporator(s) to these Articles of Incorporation are:

IHOSVANY DIAZ  
EDGAR BONILLA  
8741 S.W. 158 PL.  
MIAMI, FL 33193

  
Signature of Incorporator

4/17/00  
Date

E. Bonilla  
Signature of Incorporator

4/17/00.  
Date

ARTICLE VI DIRECTOR(S)/OFFICER(S)

The name(s) and address(es) of the director(s)/officer(s) to these Articles of Incorporation are:

IHOSVANY DIAZ (P/D)  
EDGAR BONILLA (VP/D)  
8741 S.W. 158th PL  
MIAMI, FL 33193

Having been named as registered and to accept service of process for the above started 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 of Registered Agent

4/17/00  
Date

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00 APR 18 PM 1:13  
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TALLAHASSEE FLORIDA