

PO1000083477

TRANSMITTAL LETTER

FILED
01 AUG 22 PM 12:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

100004514191--7
-08/03/01--01059--011
*****78.75 *****78.75

SUBJECT: PLAYERZ CLUB OF JACKSONVILLE, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Shomara Austin
Name (Printed or typed)

6715 POWERS AVE Ste 6
Address

JAX. FL 32217
City, State & Zip

(904) 367-0530
Daytime Telephone number

101-18304

135, 289, 2551, 2544, 2738, 2550

NOTE: Please provide the original and one copy of the articles.
Shomara Austin GAVE
AUTHORIZATION BY PHONE TO
CORRECT, act, I
DATE 8/23/01
OC. EXAM Doris Brown

D. BROWN AUG 23 2001



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

August 8, 2001

SHOMARA AUSTIN
6715 POWERS AVENUE
SUITE 6
JACKSONVILLE, FL 32217

SUBJECT: THE PLAYERS CLUB INC.
Ref. Number: W01000018304

We have received your document for THE PLAYERS CLUB INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

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) 245-6972.

Doris Brown
Document Specialist
New Filings Section

Letter Number: 301A00045527

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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ARTICLE I NAME

The name of the corporation shall be:

PLAYERZ CLUB OF JACKSONVILLE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6715 POWERS AVE Ste 6
JAX FL 32217

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

RESTAURANTS, BAR

ARTICLE IV SHARES

The number of shares of stock is: - 500 SHARES

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

1) LAJUAN LEISON - PRESIDENT
2) 6715 POWERS AVE Ste 6
3) JACKSONVILLE, FL 32217

2) 1) SHOMARA AUSLIN - VICE PRESIDENT
6715 POWERS AVE Ste 6
JAX FL 32217

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

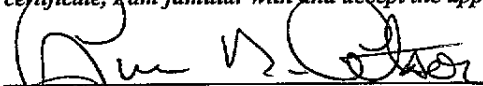
1) LAJUAN LEISON
6715 POWERS AVE Ste 6
JACKSONVILLE FL 32217

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

1) LAJUAN LEISON
6715 POWERS AVE Ste 6
JACKSONVILLE FL 32217

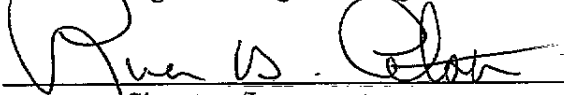
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

08-14-01

Date



Signature/Incorporator

08-14-01

Date