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SECRETARY OF STATE

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TRANSMITTAL LETTER

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

SUBJECT: COLS CORPORATE NAME - MUST INCLUDE SUFFIX)				
	(1 No. 3222 33 N o N o N o N o N o N o N o N o N o			
Enclosed are an orig	rinal and one (1) copy of the art	icles of incorporation and	l a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM: Name (Printed or typed)				
2001 Ever Hillsharough Avenue				
Tampa, Fl. 33 605 City, State & Zip				
813-234-112 Daytime Telephone number				

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) FILED 02 NOV 14 PM 2:08 ARTICLE I NAME The name of the corporation shall be: SECRETARY OF STATE Cocos pro Boxing Inc. TALLAHASSEE, FLORIDA ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 2001 East Hillsborough Avenue Tampa, FL 33605 ARTICLE III PURPOSE The purpose for which the corporation is organized is: The purposer of the Corporation is to promote and participate ARTICLE IV SHARES The number of shares of stock is: 2,000 ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): Domingo Velez-president 2001 East Hillsborgon Avenue Tampa, FL 33605 ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Domingo velez 2001 East Hillsborough Ave. Tampa, FL 33 605 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Domingo Velez 2001 East Hilleborugh Avenue Tampa, FL 33605 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

× 11-7-03 Date

×11-7-02