

P05000030208

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

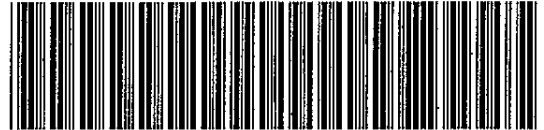
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12.3-

TRANSMITTAL LETTER

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

SUBJECT: Soccer Zone 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: Raul Felipe Agualimpia

Name (Printed or typed)

627 Honeysuckle Lane

Address

Weston, Florida, 33327

City, State & Zip

(954) 349-4173

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)

ARTICLE I NAME

The name of the corporation shall be:

Soccer Zone Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

627 Honeysuckle Lane
Weston, Florida, 33327

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Retail Sales

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Raul Felipe Agualimpia - President
Ana Cristina Montagut - Secretary

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

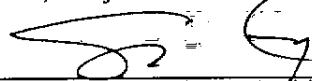
Sivory Gray
579 Lakeside Circle
Weston, Florida, 33326

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Raul Felipe Agualimpia
627 Honeysuckle Lane
Weston, Florida 33327


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

2/1/05

Date



Signature/Incorporator

2/19/05

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA