## P0500055963

Office Use Only

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## TRANSMITTAL LETTER

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

Subject

Cindy Russo's Global Basketball Camps, Inc.

Enclosed is an original and three (3) copies of the articles of incorporation and a check for

\$70.00

\$78.75 Filing Fee

& Certificate of

\$78.75 Filing Fee \$87.50 Filing Fee,

Filing Fee

& Certified Copy

Certified Copy
& Certificate

Status

(ADDITIONAL COPY REQUIRED)

FROM:

Nellie Akalp

Name

30141 Agoura Rd., Suite 205,

Address

Agoura Hills, California 91301

City, State & Zip

818-879-9079

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles. Provide TWO copies if you have requested a certified copy as designated in the boxes above.

## ARTICLES OF INCORPORATION OF

	Cilidy Russo's Olobai	basketoan Camps,	
	rator, for the purpose of forming llowing articles of incorporation		•
AD COLOR TO A	3743677		2005 APR 11 P 2:23
The name of the Corpo	ration shall be: Cindy Russo'	s Global Basketball Camp	os, IncTALLAHASSEE, FLORIDA
ARTICLE II	PRINCIPAL OFFICE		
The principal place of	business and mailing address	of this corporation shall b	e:
University Pari Miami, Florida	k, Pharmed Arena 242 1 33199		
ARTICLE III	<u>SHARES</u>		
The number of shares t \$0.01 par value per sha	hat this corporation is authoring.	zed to have outstanding a	t any one time is: 1,500 at
ARTICLE IV The name(s) and addre	INITIAL DIRECTORS ss(s) of the initial Director(s)		
Cindy Russo University Parl Miami, Florida	k, Pharmed Arena 242 33199		
ARTICLE V The name and Florida s	INITIAL REGISTERE street address of the initial reg		REET ADDRESS
Cindy Russo University Parl Miami, Florida	s, Pharmed Arena 242 33199		
ARTICLE VI The name and address of	INCORPORATOR of the incorporator to these A	rticles of Incorporation is:	:
Nellie Aka Having been named as re- place designated in this ca capacity. I further agree t	Rd., Suite 205 California 91301 Ip, Incorporator gistered agent and to accept ser ertificate, I hereby accept the ap o comply with the provisions of and I am familiar with and accept	pointment as registered ager all statutes relating to the pr	nt and agree to act in this coper and complete
(Mdy Lune	Registered Agent	Upul 7-6	25 Date
/ CHICLY IN INSSO.	NEXISTECT AREIL		1201C