

P07000037498

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

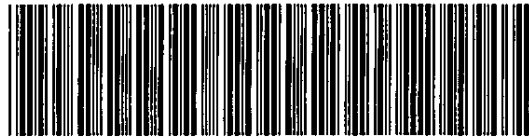
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800093725018

03/23/07--01018--007 **78.75

FILED
07 MAR 23 PM 4:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Model Fitness America, Inc
MIDDLE MAN ENTERTAINMENT
(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: OMARI DUPREE

Name (Printed or typed)

2107 N. DECATUR RD #467

Address

DECATUR GA 30033

City, State & Zip

770 558 1309

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:

MODEL FITNESS AMERICA, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2107 N. DECATUR RD #467, DECATUR GA 30033

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FITNESS COMPANY

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):

OMARI DUPREE- CEO, SECRETARY
2107 N. DECATUR RD #467
DECATUR GA 30033

ANTHONY DEVON SULLIVAN- PRESIDENT, TREASURER
420 5TH AVE
BARTOW FL 33830

ARTICLE VI REGISTERED AGENT

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

ANTHONY DEVON SULLIVAN
420 5TH AVE
BARTOW FL 33830

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

OMARI DUPREE
2107 N. DECATUR RD #467
DECATUR GA 30033

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

Anthony Devon Sullivan
Signature/Registered Agent

Date

Omari Dupree
Signature/Incorporator

Date

FILED
07 MAR 23 PM 4:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA