

P07000109066

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

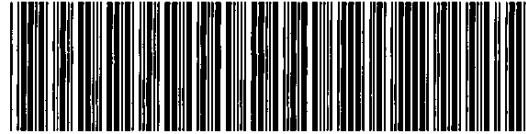
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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09/24/07--01027--012 **78.75

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FILED
07 OCT -2 PM 3:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2M-47521

COVER LETTER

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

SUBJECT: THE FUNACADEMY 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:

PAUL ROWNY

Name (Printed or typed)

169 PORTOFINO DR.

Address

HOKOMIS FL 32425

City, State & Zip

941-925-7585

Daytime Telephone number

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



500
RECEIVED

07 OCT 2007 PH 12:20

FLORIDA DEPARTMENT OF STATE

Division of Corporations

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

September 25, 2007

PAUL ROWNEY
169 PORTOFINO DR
NOKOMIS, FL 34275

SUBJECT: THE FUNACADEMY INC
Ref. Number: W07000047521

We have received your document for THE FUNACADEMY 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):

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.

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected 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) 245-6879.

Ruby Dunlap
Regulatory Specialist
New Filing Section

Letter Number: 907A00056278

FILED

ARTICLES OF INCORPORATION

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

07 OCT -2 PM 3:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

THE LAKE SUZY FUN ACADEMY INC
~~THE ZFOB ACADEMY INC~~

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

5714 CLARK RD, SUNRISE PLAZA, SARASOTA
FL 34233

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

A CHILDRENS ENTERTAINMENT CENTER.

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):

PAUL ROWNEY, 169, PORTOFINO DR, NOKOMIS
FL 34275

ARTICLE VI REGISTERED AGENT

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

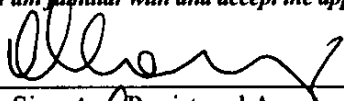
PAUL ROWNEY, 169, PORTOFINO DR
NOKOMIS, FL 34275

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

~~as above~~ PAUL ROWNEY
169, PORTOFINO DR
NOKOMIS, FL 34275

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



Signature/Incorporator



Date



Date