P08000001638

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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W07-62135

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DIVISION OF CORPORATIONS
08 JAN -7 AM 9:11

1/8/08

TRANSMITTAL LETTER

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DIVISION OF CORPORATIONS

08 JAN -7 AM 9:11

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

SUBJECT: CENTRAL FLORIDA TENNIS ACADEMY 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: PRO TAX SERVICES, INC
Name (Printed or typed)

937 LONGDALE AVE
Address

LONGWOOD, FL 32750
City, State & Zip

(407) 835 - 9845
Daytime Telephone number

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

FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
08 JAN -7 AM 8:00
DIVISION OF CORPORATIONS

December 27, 2007

PRO TAX SERVICES INC.
937 LONGDALE AVENUE
LONGWOOD, FL 32750

SUBJECT: CENTRAL FLORIDA TENNIS ACADEMY INC.
Ref. Number: W07000062135

We have received your document for CENTRAL FLORIDA TENNIS ACADEMY INC. and your check(s) totaling $70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

An effective date **may** be added to the Articles of Incorporation **if a 2008 date is needed**, otherwise the date of receipt will be the file date. **A separate article must be added to the Articles of Incorporation for the effective date.**

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) 245-6973.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 907A00071728

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JAN -7 AM 9:11

ARTICLES OF INCORPORATION

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 JAN -7 AM 9:11

ARTICLE I NAME

The name of the corporation shall be:

CENTRAL FLORIDA TENNIS ACADEMY INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

212 VIA TUSCANY LOOP
LAKE MARY, FL 32746

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is:

100 - ONE HUNDRED

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DRISS OUAZZANI - PRESIDENT
PO BOX 161791
ALTAMONTE SPRINGS, FL 32716

ARTICLE VI REGISTERED AGENT

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

DRISS OUAZZANI
212 VIA TUSCANY LOOP
LAKE MARY, FL 32746

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

DRISS OUAZZANI
PO BOX 161791
ALTAMONTE SPRINGS, FL 32716

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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 — Date: 12/21/2007

Signature/Incorporator — Date: 12/21/2007