

P09000058065

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

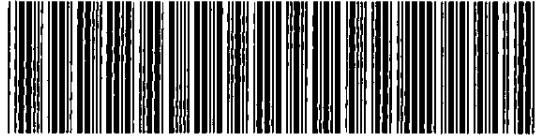
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700150272497

04/16/09--01019--007 **78.75

FILED

2009 JUL -8 P 2:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W0900001811

COVER LETTER

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

SUBJECT: Florida Wrestling Federation, 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: Joanne C. Grant
Name (Printed or typed)

1243 Lake Willisara Circle
Address

Orlando, FL 32806
City, State & Zip

407-375-9940
Daytime Telephone number

jadeproduction@bellsouth.net ✓
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 JUL - 8 P 2:47

FILED

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 17, 2009

JOANNE C GRANT
1243 LAKE WILLISARA CIRCLE
ORLANDO, FL 32806

SUBJECT: E CUBED, INC.
Ref. Number: W09000018111

We have received your document for E CUBED, 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 administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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.

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) 245-6052.

Paisley A Alford
Clerk
New Filing Section

Letter Number: 609A00013003



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 10, 2009

JOANNE C GRANT
1243 LAKE WILLISARA CIRCLE
ORLANDO, FL 32806

SUBJECT: FLORIDA WRESTLING FEDERATION, INC.
Ref. Number: W09000018111

We have received your document for FLORIDA WRESTLING FEDERATION, 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):

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.

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) 245-6052.

Paisley A Alford
Clerk
New Filing Section

Letter Number: 609A00013003

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 Florida Wrestling Federation, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

1243 Lake Willisara Circle, Orlando, FL 32806

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Providing wrestling facilities.

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):

Joanne C. Grant, 1243 Lake Willisara Circle, Orlando, FL 32806 - Director

ARTICLE VI REGISTERED AGENT

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

Joanne C. Grant, 1243 Lake Willisara Circle, Orlando, FL 32806

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Joanne C. Grant, 1243 Lake Willisara Circle, Orlando, FL 32806

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 JUL -8 P 2:47

FILED

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

6/17/09

Date



Signature/Incorporator

6/17/09

Date