

P10000097098

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

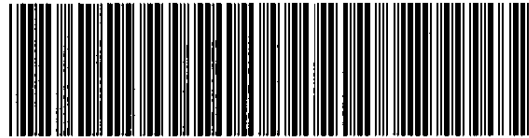
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300187631253

11/29/10--01019--007 **70.00

FILED
2010 NOV 29 PM 12:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers DEC 01 2010

COVER LETTER

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

SUBJECT: Primal Playground 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: Douglas Dean Krizan

Name (Printed or typed)

3801 Chickasha Rd.

Address

Lantana, Florida 33462

City, State & Zip

561-389-2548

Daytime Telephone number

DouglasCPT@aol.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 NOV 29 PM 12:35

FILED

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: Primal Playground Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
3801 Chickasha Rd
Lantana Fl.
33462

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Personal Physical Training
Bootcamp Style Training

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

| | |
|--|-----------------------|
| Name and Title: <u>Douglas Krizan, President</u> | Name and Title: _____ |
| Address: <u>3801 Chickasha Rd.</u> | Address: _____ |
| <u>Lantana Fl.</u> | _____ |
| <u>33462</u> | _____ |

| | |
|-----------------------|-----------------------|
| Name and Title: _____ | Name and Title: _____ |
| Address: _____ | Address: _____ |
| _____ | _____ |
| _____ | _____ |

| | |
|-----------------------|-----------------------|
| Name and Title: _____ | Name and Title: _____ |
| Address: _____ | Address: _____ |
| _____ | _____ |
| _____ | _____ |

ARTICLE VI REGISTERED AGENT

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


Name: Douglas Krizan
Address: 3801 Chickasha Rd
Lantana Fl 33462

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Douglas Krizan
Address: 3801 Chickasha Rd
Lantana Fl. 33462

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

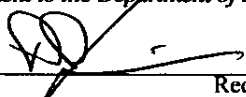


Required Signature/Registered Agent

11/22/10

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

11/22/10

Date

FILED
2010 NOV 29 PM 12:35
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA