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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

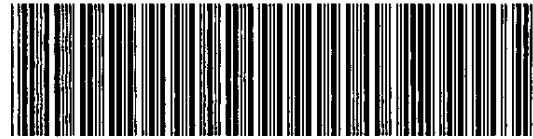
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2011 JAN 21 PM 4:06

1/25/11

## COVER LETTER

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

SUBJECT: \_\_\_\_\_

Travel Baseball Club 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 D. Scott

Name (Printed or typed)

6250 Coral Ridge Dr.

Address

Coral Springs, FL 33076

City, State & Zip

954 379-4321

Daytime Telephone number

dscott@productionstaff.net

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

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**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: Travel Baseball Club Inc.

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**ARTICLE II PRINCIPAL OFFICE**

Principal street address

6250 CORAL RIDGE DR.

CORAL SPRINGS, FL

33076

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Mailing address, if different is:

**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

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: PAUL D. SCOTT - President

Address: 6250 CORAL RIDGE DR.

CORAL SPRINGS, FL 33076

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: PAUL D. SCOTT

Address: 6250 CORAL RIDGE DR.

CORAL SPRINGS, FL 33076

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: PAUL D. SCOTT

Address: 6250 CORAL RIDGE DR.

CORAL SPRINGS, FL 33076

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

Paul D. Scott

Required Signature/Registered Agent

1/18/11

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.

Paul D. Scott

Required Signature/Incorporator

1/18/11

Date