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COVER LETTER

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

SUBJECT: ELITE PRO BALL 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 \$78.75 \$78.75 \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: MICHAEL DENNIS SPINA, JR. Name (Printed or typed) 3107 SW 298TH STREET Address NEWBERRY, FL City, State & Zip 513-444-7525 Daytime Telephone number

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

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

SPINABASEBALL18@AOL.COM

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

The name of the corp		ADEMY, INC.	·
ARTICLE II 1	PRINCIPAL OFFICE		
	Principal street address	ν	Aailing address, if different is:
24	880 NW 16th Avenue		(513
	wberry, FL 32669		y, FL 32669
ZKI.	WUEITY, FL 32009	TACAMOCIT	y, FL 32009
			<u> </u>
ARTICLE III P	URPOSE		
	ch the corporation is organized is:		A B T
	LAWFUL BUSINESS.		2387 <u>-</u>
7	. 2 1117 02 300 111200.		රා
			
ARTICLE IV	SHARES		
The number of shares			·
The number of share.	S OI SLOCK IS. I O O		
ARTICLE V 1	NITIAL OFFICERS AND/OR DIRECTO)RS	The state of the s
	::Cedrick Bowers-Director		Michael Dennis Spina Jr -Directo
Address:	10336 NW 28th Place	Address:	3107 SW 298th Street
	GAINESVILLE, FL32606		NEWBERRY, FL 32669
			<u> </u>
			
Name and Title	e:	Name and Title:	
Address:		Address:	· · · · · · · · · · · · · · · · · · ·
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Name and Title	e:	Name and Title:	
Address:		Address: _	
			<u> </u>
	<u>EGISTERED AGENT</u>		
	da street address (P.O. Box NOT acceptable)		t is:
Name:	Michael Dennis Spina, Jr.		
Address:	3107 SW 298th STREET		
	NEWBERRY, FL 32669		
	NCORPORATOR		
	ess of the Incorporator is:		
Name:	Brian Grieper, Esq.	<u> </u>	
Address:	7467 NW 114th Terrace		
	Parkland, FL 33076		
this certificate, I am	as registered agent to accept service of proceedings of the appointment as research.	egistered agent and ag	
	Required Signature/Registered Agent		Date
	A Moduling Digitating McGisteren Wigelit		Date
I submit this docum	ent and affirm that the facts stated herein a	re true. I am aware i	that the false information submitted in a
	artment of State constitutes a third degree feld		
17		p. c. mon jor m	
19.	Kanina .		2-15-11
11th	Require Signature/Incornorator		- Note