P11000066690

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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W11-35799



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FALL MINSSEE, FLORIDA

× 07/25/11



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FLORIDA DEPARTMENT OF STATE TALLAHASSEE, FLORIDA
Division of Corporations

July 6, 2011

SCOTT C. WILLIAMS 4055 BIRCHWOOD DRIVE BOCA RATON, FL 33487

SUBJECT: SCOTS TENNIS INC. Ref. Number: W11000035799

We have received your document for SCOTS TENNIS 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 document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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) 245-6949.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 811A00016066

Floreda Departmet 850 - 488-9000

Secretary of State 850-245-6052

850- 245-6056 x #7

Ath: Thomas www.sunbiz.org

COVER LETTER

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

SUBJECT: Scots Tennis Inc.				
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
Enclosed are an original and one (1) copy of the arti-	cles of incorporation an	d a check for:		
Enclosed are an original and one (1) copy of the arti-	eles et incorporation an	a 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 CO	OPY REQUIRED		
FROM: Scott C. Williams	(D.1)			
Name	(Printed or typed)			
1055 Direbugad Drive				
4055 Birchwood Drive				
•	1001000			
Boca Raton, Florida 33/	187			
Boca Raton, Florida 334 City,	State & Zip			
•				
561.210.2126				
Daytime To	elephone number			
4 30 6 14 1	•			
scott.williams@saintandrews.net E-mail address: (to be used for future annual report notification)				
E-man address. (to be used	. 101 fatare amuai report	nouncation)		

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)

	in compnance with chapter 607 and	or Chapter 021,	i.b. (Front)
	Scots Tennis Inc.		
The name of the corpo	oration shall be:		
ARTICLE II P.	RINCIPAL OFFICE		NA 11
	Principal street address		Mailing address, if different is:
	55 Birchwood Drive	<u> </u>	
_Ba	oca Raton, Florida 33487		
			
ARTICLE III PU	TDDOSE		
	th the corporation is organized is:		
Tennis Instructi			
remma manucu			
			•
		•	
ARTICLE IV S	<u>HARES</u>		
The number of shares	of stock is: 100		
		~	
	South C. Williams Provident		Candaga M. Milliama Vica Draeidant
	Scott C. Williams President	Name and little	Candace M. Williams Vice President
Address:	4055 Birchwood Drive		4055 Birchwood Drive Boca Raton, Florida 33487
	Boca Raton, Florida 33487	-	Boca Raion, Florida 35467
		-	
Name and Title	:	Name and Title	2
Address:		Address:	
		-	
		•	
		-	
Name and Title			
Address:	***	Address:	
	-	-	
		-	
ADTICLE OF D	POICTEDED ACENT		
	EGISTERED AGENT a street address (P.O. Box NOT acceptable) of	the weekstaned ees	mt io
Name:			IR IS:
Address:	Scott C.Williams 4055 Birchwood Drive	•	i .
Audicas.	Boca Raton, Florida 33487	•	7 0 →
	Doca Raion, Florida 33467	•	
ARTICLE VII IN	VCORPORATOR		
	ss of the Incorporator is:		The state of the s
Name:	Scott C. Williams		COST CONTRACTOR
Address:	4055 Birchwood Drive		in the second of
	Boca Raton, Florida 33487		
	,		
Having been named	as registered agent to accept service of process	for the above sta	ated corporation at the filace designated in .
this certificate, I am f	amiliar with and accept the appointment as regi	stered agent and	agree to act in this capa ci ty;
			, P 00 1
1 w	(. Wyla		06. 28 II
	Required Signature/Registered Agent		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 Depart	rtment of State constitutes a third degree felony	as provided for i	n s.817.155, F.S.
\mathcal{L}			-1 -00 -11
100	& while		06 28-11
	Required Signature/Incorporator		Date