

P12000002077

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

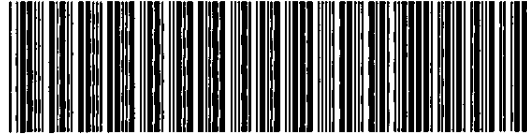
(Business Entity Name)

(Document Number)

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

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FILED  
2012 JAN -6 PM 1:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers JAN 09 2012

## COVER LETTER

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

SUBJECT: International Golf Performance Council, 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: Brent Metzler

Name (Printed or typed)

2533 Lexington Oak Drive

Address

Brandon, FL 33511

City, State & Zip

321-262-8789

Daytime Telephone number

bmetzler@tampacpa.com

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

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

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**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: International Golf Performance Council, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
13506 Summerport Village Parkway  
Suite 354  
Windermere, FL 34786

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: 1,000

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

Name and Title: <u>Dr. Craig Davies President</u>	Name and Title: _____
Address: <u>13506 Summerport Village Parkway</u>	Address: _____
<u>Suite 354</u>	_____
<u>Windermere, FL 34786</u>	_____

Name and Title: <u>Brent Metzler Director</u>	Name and Title: _____
Address: <u>13506 Summerport Village Parkway</u>	Address: _____
<u>Suite 354</u>	_____
<u>Windermere, FL 34786</u>	_____

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: Brent Metzler  
Address: 2533 Lexington Oak Drive  
Brandon, FL 33511

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Brent Metzler  
Address: 2533 Lexington Oak Drive  
Brandon, FL 33511

*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

1/4/11

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.*



Required Signature/Incorporator

1/4/11

Date

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