

P12000024568

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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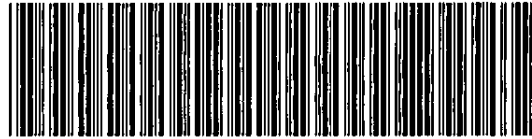
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 MAR 12 PM 3:19

PS 3/13/12

COVER LETTER

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

SUBJECT: NinjaFit Paddleboard Co.

(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: Cory Rider

Name (Printed or typed)

5356 35th Ter N

Address

St. Petersburg, FL 33710

City, State & Zip

813-447-0600

Daytime Telephone number

coryrider@me.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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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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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:

NinjaFit Paddleboard Co.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

5356 35th Ter N
St. Petersburg, FL 33710

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

**To sell Stand Up Paddleboards
& accessories.**

ARTICLE IV SHARES

The number of shares of stock is:

200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Cory Rider - President/CEO**

Address: **5356 35th Ter N
St. Petersburg, FL 33710**

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: **Cory Rider**

Address: **5356 35th Ter N
St. Petersburg, FL 33710**


ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **Cory Rider**

Address: **5356 35th Ter N
St. Petersburg, FL 33710**

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

3-9-12

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

3-9-12

Date