P/2000085874

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PICK-UP WAIT MAIL				
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COVER LETTER \$

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

SUBJECT: REVOLUTION ROLLER DERBY, INC (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the article	cles of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM: ROSE FRIZZLE Name	(Printed or typed)
1200 STARKEY RD #20	5 Address
LARGO FL 33778	State & Zip
727-280-7981 Daytime Te	elephone number
IRONROSE9700@GMA E-mail address: (to be used	L.COM I for future annual report notification)

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 REVOLUTION ROL	LER DERBY INC	
The name of the c	orporation shall be:		
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing ac	ddress, if different is:
	1200 STARKEY ROAD #205		
	LARGO FL 33778		
ARTICLE III	PURPOSE		
	which the corporation is organized is:		
ANY AND A	LL LAWFÙL	•	
ARTICLE IV	SHARES		
	ares of stock is:1000		
4 D. W. C. C. D. 17		0.000 D.0	
	INITIAL OFFICERS AND/OR DIREC		CA CUMMEDO DID
Name and I	Title: ROSE FRIZZLE, S/T 1200 STARKEY RD #205	Name and The: JESSIC	1123RD TERR
Address.	LARGO FL 33778) FL 33778
	LANGO FL SS//O	LANGE	J.F.L.33776
	Title:SILVIE HEATHCOCK, V/D	Name and Title:	
Address:	13508 FOREST LAKE DR	Address:	
	LARGO FL 33771		
Name and T	Fitle:		
Address:		Address:	
	· · · · · · · · · · · · · · · · · · ·		
	-		
ARTICLE VI	REGISTERED AGENT		
	orida street address (P.O. Box NOT accepta	ble) of the registered agent is:	 1
Name:	ROSE FRIZZLE		Page 75
Address:	1200 STARKEY RD #205		
	LARGO FL 33778		
ARTICLE VII	INCORPORATOR		Sol I man
	dress of the Incorporator is:		
Name:	ROSE FRIZZI F		Pic p The
Address:	1200 STARKEY RD #205		
	LARGO FL 33778		95 1
**			
Having been nan	ned as registered agent to accept service of p	rocess for the above stated corpo	oration at the place designated in
inis certificate, Ta	m familiar with and accept the appointment	as registerea agent ana agree to ac	ct in inis capacity
06.4877	V dia		18/2/2017
- Voisse	Required Signature/Registered Ager		10/3/0010
' • (Kequired Signature/Registered Ager	it	Date
I submit this doc	ument and affirm that the facts stated herei	in are true. I am aware that the	false information submitted in a
	Department of State constitutes a third degree		
1,)	N	-	1x12/2010
	Nah		10/5/4012
- V	Required Signature/Incorporator		Date