## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6381

RECEIVED JAN - 7 2013

From:

Account Name : BARINAS & ASSOCIATES INC.

Account Number : I20000000082 Phone : (305)871-0889 : (305)870-9623 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

| Email: | Address:   |      |      |      |
|--------|--|------|------|------|
| DIMOTT | TWO TO THE TABLE OF T | <br> | <br> | <br> |

# FLORIDA PROFIT/NON PROFIT CORPORATION HOBBY SPORT, CORP

| Certificate of Status | 1       |
|-----------------------|---------|
| Certified Copy        | 0       |
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Electronic Filing Menu Corporate Filing Menu

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### **COVER LETTER**

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

| SUBJECT: HOBBY SPORT, CORP  (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) |                                  |                             |                               |  |
|---|----------------------------------|-----------------------------|-------------------------------|--|
| Enclosed are an orig  | ginal and one (1) copy of the ar | ticles of incorporation and | i a check for:                |  |
| □ \$70.00   | <b>378.75</b>                    | \$78.75                     | <b>\$87.50</b>                |  |
| Filing Fee  | Filing Fee                       | Filing Fee                  | Filing Fee,<br>Certified Copy |  |
|   | & Certificate of Status          | & Certified Copy            | & Certificate of Status       |  |
|   |                                  | ADDITIONAL CO               | PY REQUIRED                   |  |
|   |                                  |                             |                               |  |
| FROM: Y   | ANELLE M. BAF                    |                             |                               |  |
|   | Nam                              | e (Printed or typed)        |                               |  |

Name (Printed or typed)

5701 NW 36 ST

Address

MIAMI, FL 33166

City, State & Zip

305-871-0889

Daytime Telephone number

BARINASB © GMAIL.COM

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

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

13 JAN -7 AH II: 56

SKOLK RILEND F. SOLSTAN

| ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) | SECREMATOR STATE TYPICAL A COMPANIONS |
|--|---------------------------------------|
|  |                                       |

| ARTICLE 1 N. The name of the corpo | AME HOBBY SPORT, Coration shall be: HOBBY SPORT, C                        | ORP.                                   | <u> 13 JAN -7 AMII: 56</u> |
|------------------------------------|---|--|----------------------------|
| ARTICLE II P                       | Principal street address  |  | tress, If different is:    |
| 11459 NW 7                         |   |  |                            |
| MIAMI, FL 3                        | 3178  |  |                            |
|                                    |   |  |                            |
| ARTICLE III PU                     | TRPOSE the corporation is organized is: ANY A                             | ND ALL LAWFU                           | L PURPOSES                 |
| the purpose for which              | in the corporation is officialized is.                                    |  |                            |
| ****                               |   | A 44 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 |                            |
|                                    |   |  |                            |
|                                    |   | 3,50                                   |                            |
|                                    |   |  |                            |
|                                    |   |  |                            |
|                                    | - Added   |  |                            |
| 1 marci 5 77 5                     |   |  |                            |
| ARTICLE IV S. The number of shares | nof stock is: 1000  | <del></del>                            |                            |
|                                    |   | 5                                      |                            |
|                                    | NITIAL OFFICERS AND/OR DIRECTOR<br>Title: Maria L. Boulton Jimenez, PVSTD |  |                            |
| Name and T                         | EL SOLAR DE HATILLO, EDIF, VILLA SOLAR                                    |  |                            |
| Address                            | APT. A74, PISO 7, EL HATILLO  | Address:                               |                            |
|                                    |   |  |                            |
|                                    | CARACAS, VENEZUELA, 1083  |  |                            |
| Name and T                         | itle:   | Name and Title:                        |                            |
| Address                            |   |  |                            |
| Audi 433                           |   | 72417007                               | <u> </u>                   |
|                                    |   | ·                                      |                            |
|                                    |   | · · · · · · · · · · · · · · · · · · ·  |                            |
| Name and T                         | itle:   | Name and Title:                        |                            |
| Address                            |   |  | _                          |
|                                    |   | ·                                      |                            |
|                                    |   | •                                      |                            |

| Name an                              | d Title:  | Name and Title:  |
|--------------------------------------|---|--|
| Address                              |   | Address:   |
|                                      |   |  |
|                                      |   |  |
| ARTICLE VI                           | REGISTERED AGENT     orido street address (P.O. Box NOT acceptable) of  | the registered apont is:   |
| Name:                                | BARINAS & ASSOCIATES, INC.  | The same of the sa |
| Address:                             | 5701 NW 36 ST   | Windows Transfer   |
|                                      | MIAMI, FL 33166   |  |
| ARTICLE VII                          | INCORPORATOR  | 7 AMII: 56   |
| The name and as                      | ddress of the Incorporator is:  |  |
| Name:                                | Maria L. Boulton Jimenez  |  |
| Address:                             | EL SOLAR DE HATILLO, EDIF. VILLA SOLAR, # A74   | ී<br>-   |
|                                      | PISO 7, EL HATILL(), CARACAS, VE, 1083  |  |
| Having been not this certificate, I  | med as registered agent to accept service of process am familiar with and accept the appointment as reg                                     | for the above stated corporation at the place designated in istered agent and agree to act in this capacity  |
| _                                    | Required Signature/Registered Agent   | /Date/   |
| I submit this doc<br>document to the | cument and affirm that the facts stated herein are Department of State constitutes a third degree felon Required Signatures in the portator | true. I am aware that the false information submitted in a y as provided for in s.817.155, F.S.  Orlow Date  |