

P13000099183

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP☐ WAIT☐ MAIL

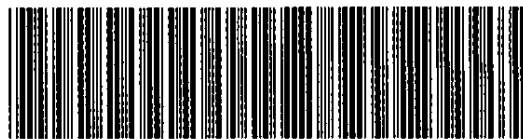
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

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

SUBJECT: **Champions Real Estate, 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: **Ruth Cabella**

Name (Printed or typed)

4350 Duhme Road

Address

Madeira Beach, Florida 33708

City, State & Zip

(727)398-2774

Daytime Telephone number

c21champ@aol.com

E-mail address: (to be used 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
The name of the corporation shall be: Champions Real Estate, Inc.

ARTICLE II PRINCIPAL OFFICE
Principal street address

Mailing address, if different is:

4350 Duhme Road
Madeira Beach, Florida 33708

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Real Estate Company

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ruth Cabella, President
Address: 4350 Duhme Road
Madeira Beach, FL 33708

Name and Title: Ruth Cabella, Vice Pre
Address: 4350 Duhme Road
Madeira Beach, FL 33708

Name and Title: Ruth Cabella, Secretary
Address: 4350 Duhme Road
Madeira Beach, FL 33708

Name and Title: Ruth Cabella, Treasure
Address: 4350 Duhme Road
Madeira Beach, FL 33708

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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TALLAHASSEE FLORIDA

(conti)

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: Ruth Cabella
Address: 4350 Duhme Road
Madeira Beach, FL 33708

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Ruth Cabella
Address: 4350 Duhme Road
Madeira Beach, FL 33708

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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

Ruth Cabella RUTH CABELLA 12/4/13
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 Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Ruth Cabella RUTH CABELLA 12/4/13
Required Signature/Incorporator Date