

P14000035390

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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04/18/14--01023--017 **70.00

FILED

14 APR 18 AM 9:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Hardee Baseball Team, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Lenora M. Hooten

Name (Printed or typed)

1389 Lisa Drive

Address

Wauchula, FL 33873

City, State & Zip

863-773-6763 or 863-445-0868

Daytime Telephone number

lhooten915@gmail.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: Hardee Baseball Team, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1389 Lisa Drive

Wauchula, FL 33873

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Youth Baseball Team for the enrichment of kids.

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TALLAHASSEE FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Lamar Smith, President

Address: 410N. Ohio Avenue
Wauchula, FL 33873

Name and Title: Lenora Hooten, Vice President

Address: 1389 Lisa Drive
Wauchula, FL 33873

Name and Title: Lenora Hooten, Secretary

Address: 1389 Lisa Drive
Wauchula, FL 33873

Name and Title: Lenora Hooten, Treasurer

Address: 1389 Lisa Drive
Wauchula, FL 33873

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

(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: Lenora M. Hooten
Address: 1389 Lisa Drive
Wauchula, FL 33873

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Lenora M. Hooten
Address: 1389 Lisa Drive
Wauchula, FL 33873

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TALLAHASSEE FLORIDA

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

4/4/2014
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

4/4/2014
Date