

P4000049415

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

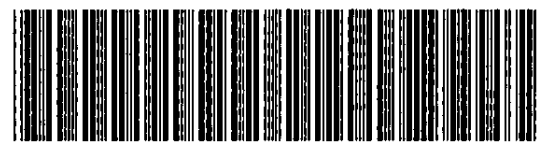
(Business Entity Name)

(Document Number)

Certified Copies Certificates of Status

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06/05/14--01010--005 **157.50

14 JUN -5 PM 12:16
CLERK OF SUPERIOR COURT
STATE OF MICHIGAN

COVER LETTER

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

SUBJECT: MVP SPORTS WORLDWIDE. 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: Troy L. Hughes

Name (Printed or typed)

4730 S. W. 54 Terrace

Address

Davie, Florida 33314

City, State & Zip

~~593-24-8495~~

954-543-2503

Daytime Telephone number

t2000@desoto.net

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)

SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JUN -5 PM 12:17

ARTICLE I NAME
The name of the corporation shall be: MVP Sports Worldwide, Inc

ARTICLE II PRINCIPAL OFFICE
Principal street address

Mailing address, if different is:

4730 S. W. 54 Terrace
Davie, Florida

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: To work on Sports Activities with youth sports programs, camps and clinics for youth

ARTICLE IV SHARES 1000
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Troy L Hughes, President Name and Title: _____
Address: 4730 S. W. 54 Terrace Address: _____
Davie, Florida 33314 _____

Name and Title: Luis Heran, Vice President Name and Title: _____
Address: 6350 Palm Trace Landings Drive Address: _____
#202 _____
Davie, Florida 33314 _____

Name and Title: Wilfredo Rubio, Secretary-Treasurer Name and Title: _____
Address: 2362 S. W. 70 Way Address: _____
Davie, Florida 33317 _____

(cont.)

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:

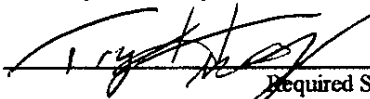
Name: Troy L. Hughes
Address: 4730 S. W. 54th Terrace
Davie, Florida 33314

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Troy L. Hughes
Address: 4730 S. W. 54 Terrace
Davie, Florida 33314

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

5/30/2014
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

5/30/2014
Date