P14000371321

(Requestor's Name)				
(Ad	dress)	 		
(Address)				
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Do	cument Number)			
Certified Copies	_ Certificate	s of Status		
Special Instructions to Filing Officer:				
Office Use Only				
Office Use Only				



400262890544

400262890544 08/04/14--01034--009 **78.75

2014 AUG 25 AM 9: 07 SECRETARY OF STATE FALLAHASSEE, FLORIDA



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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 11, 2014

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DAN BOLDEN 2419 E. CIVITAN AVENUE LAKELAND, FL 33801

SUBJECT: GENERAL UNIT BOXING, INC.

Ref. Number: W14000048995

We have received your document for GENERAL UNIT BOXING, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 314A00017200

Sylvia Gilbert Regulatory Specialist II New Filing Section

www.sunbiz.org

COVER LETTER

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

SUBJECT:	General Unit Bo	oxing, Inc	
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	ticles of incorporation and	d 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 CO	PY REQUIRED
FROM: D	an Bolden	e (Printed or typed)	
24	419 E Civitan Av		
L	akeland, FL 3380	Address	
	City	, State & Zip	
86	63-934-6817		
	Daytime 7	Telephone number	
th	eline1976@yahoo.d	com	
~	E-mail address: (to be use	ed 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 II PR	ation shall be:	Boxing, Inc 2014 AUC 25
	INCIPAL OFFICE	Boxing, Inc 2014 AUG 25 AM 9: 07
625 NI Wahaa	Principal street address	Mailing address Mattherent is: 2419 E Civitan Ave. Floor
635 N Wabas		
Lakeland, FL	33815	Lakeland, FL 33801
ARTICLE III PUT The purpose for which	POSE the corporation is organized is:	school for children and adults
	, ,	

The number of shares o	ARES 100	
	TIAL OFFICERS AND/OR DIRECTO	<u>RS</u>
Name and Tit		
	_{le:} Dan Bolden, President	Name and Title:
Address	2419 E Civitan Ave	Name and Title:Address:
Address		-
Address	2419 E Civitan Ave	-
Address	2419 E Civitan Ave	-
	2419 E Civitan Ave Lakeland, FL 33801	Address:
Name and Titl	2419 E Civitan Ave Lakeland, FL 33801	Address: Name and Title:
	2419 E Civitan Ave Lakeland, FL 33801	Address: Name and Title:
Name and Titl	2419 E Civitan Ave Lakeland, FL 33801	Address: Name and Title: Address:
Name and Titl	2419 E Civitan Ave Lakeland, FL 33801	Address: Name and Title: Address:
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Name and Titl Address	2419 E Civitan Ave Lakeland, FL 33801	Address: Name and Title: Address: Name and Title:
Name and Titl Address Name and Titl	2419 E Civitan Ave Lakeland, FL 33801	Address: Name and Title: Address: Name and Title:

Name an	d Title:	Name and Title:
Address		Address:
ARTICLE VI	REGISTERED AGENT	
The name and FI	orida street address (P.O. Box NOT acceptable) o	the registered agent is:
Name:	Dan Bolden	
Address:	2419 E Civitan Ave	
	Lakeland, FL 33801	_
ARTICLE VII	INCORPORATOR	
The <u>name and ac</u>	Idress of the Incorporator is:	
Name:	Dan Bolden	
Address:	2419 E Civitan Ave	
	Lakeland, FL 33801	
Having been nan this certificate, I/o	and 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
I submit this doc document to the	Required Signature/Registered Agent ument and affirmathly the facts stated herein are Department of State constitutes a third degree felon Required Signature/Incorporator	Date true. I am aware that the false information submitted in a y as provided for in s.817.155, F.S. S / () () Date
	Tradacta o. Scarato a trivos portatos	Dute