## 7400085608

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Ви	ısiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

W14-56777



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TALLAHASSEE FORMS

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OCT 2 0 2014 S. GILBERT

## **COVER LETTER**

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

SUBJECT:	IECT: CHAMPIONS INC.  (PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)			
	(PROPOSED CÖRPORA'	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u> )	
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	i a check for:	
	\$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	Certified Copy & Certificate of	
		ADDITIONAL CO	Status OPY REQUIRED	
FROM:	5480 Pal PINELLAS PAG City,	P. REDMAN (Printed or typed)  M. CREST Conditions  EX. FL 33 State & Zip		
<del></del>	,	578 - 9804 elephone number		
	Toerenan 37 pgh (E-mail address: (to be used	@yahoo.com	notification)	
	E-man address. (10 00 used	. zor tataro annaan roport		

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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 17, 2014

JOSEPH P. REDMAN 5480 PALM COAST COURT PINELLAS PARK, FL 33782

SUBJECT: CHAMPION'S INC Ref. Number: W14000056777

We have received your document for CHAMPION'S 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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.

Sylvia Gilbert Regulatory Specialist II New Filing Section

Letter Number: 314A00019871

SECRETARY OF STATE

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the cornera	tion shall be: 5, P. REN	MAL) ILIC.	1400 - 151
ARTICLE II PRI	NCIPAL OFFICE Principal street address	Ma	ailing address, if different is: PH 2:
5480 Pala	y Crest Court	S	ame CAMASSIA
- Muellas V	DARK FL 33782		
ARTICLE III PUR The purpose for which t	POSE he corporation is organized is:		
	ut & sportsbar		
	•	· · · · · · · · · · · · · · · · · · ·	John Medical Control of the Control
ARTICLE IV SHA	IRES stock is: /()()		
	TIAL OFFICERS AND/OR DIRE		
Address	5480 Palm Crest (	Court Address:	
	Pinellas Park, FL	33782	
Name and Title		Name and Title:	
Address		Address:	
			***
Name and Title		Name and Title:	
Address	<u></u>	Address:	<del>, , , , , , , , , , , , , , , , , , , </del>

Name and Tit	le:Name and Title:
Address	Address:
	CGISTERED AGENT
The name and Florid	a street address (P.O. Box NOT acceptable) of the registered agent is:
Name:	Joseph P. REDMN
Address:	5480 Palm Crest Court
	PINELLAS PORK, FL 33782
ARTICLE VII IN	CORPORATOR
The name and addres	s of the Incorporator is;
Name:	Soseph P. Reman
Address:	5480 Palm Crest Court
	Pinellas Pork FL 33782
Having been named of this certificate, I am f	is registered agent to accept service of process for the above stated corporation at the place designated in Intiliar with and accept the appointment as registered agent and agree to act in this capacity
	10-13-14
	Required Signature Registered Agent Date
submit this docume document to the Depo	nt and affirm that the facts stated herein are true I am aware that the false information submitted in a riment of State constitutes a third degree felons as provided for in s.817.155, F.S.
Line	Required Signature/Isperporator 10-13-14 Date