

P/5000004803

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

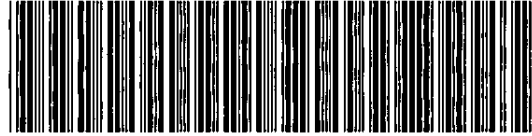
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 JAN 20 PM 12:46

W14-71823

01/20/15



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
15 JAN 20 AM 9:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

December 16, 2014

BOB TROTTO
P O BOX 1664
MOUNT DORA, FL 32756

SUBJECT: BCA OF FAT CATS, INC.
Ref. Number: W14000074823

We have received your document for BCA OF FAT CATS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 014A00026606

COVER LETTER

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

SUBJECT: BCA OF FAT CATS, 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: Bob Trotto
Name (Printed or typed)

P O Box 1664
Address

MOUNT DORA, FL 32756
City, State & Zip

352-636-3037
Daytime Telephone number

SHEASROB@CENTURYLINK.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)

ARTICLE I NAME

The name of the corporation shall be: BCA OF FATCATS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2721 W. Old US Hwy 441
MOUNT DORA, FL
32757

PO Box 1664
MOUNT DORA, FL
32756-1664

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: POOL LEAGUE

ARTICLE IV SHARES

The number of shares of stock is: 1 - one

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Bob Trotto, PRES Name and Title: _____

Address PO Box 1664 Address: _____
MOUNT DORA, FL
32756

Name and Title: LESLIE HOPKINS, SGT Name and Title: _____

Address 11545 LAKE GARY RD Address: _____
CLERMONT, FL 34714

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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15 JAN 20 PM 12:46

(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: Bob Trotto

Address: 3580 BRANCH AVE.
MOUNT DORA, FL 32757

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Bob Trotto

Address: P O Box 1664
MOUNT DORA, FL 32757

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

12/09/14
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

12/09/14
Date