P15000036941

(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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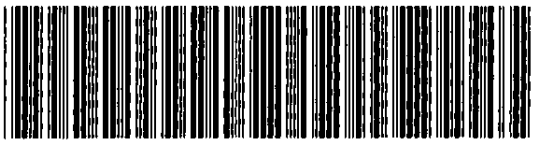

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15 MAR 20 AM 9:22

SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

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

SUBJECT: Minus20club,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: Diana Roberts
Name (Printed or Typed)

100 Uno Lago Drive#203
Address

Juno Beach, Fl 33408
City, State & Zip

561-510-3425
Daytime Telephone number

minus 20club
~~sphroberts~~@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: MINUS20CLUB, INC.

ARTICLE II PRINCIPAL OFFICE

Principal **street** address
100 UNO LAGO DRIVE #203
JUNO BEACH, FL 33408

Mailing address, if different is:
P.O. BOX 14991
NORTH PALM BEACH, FL 33408

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
DISC JOCKEY AND EVENT PROMOTER

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: PRESIDENT
Address: DIANA ROBERTS
100 UNO LAGO DRIVE #203
JUNO BEACH, FL 33408

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

15 MAR 20 AM 9:22
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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: Diana Roberts

Address: 100 Uno Lago Drive#203

Juno Beach, Fl. 33408

ARTICLE VII INCORPORATOR

The name and address of the incorporator is

Name: Gloria Malden Kaplan,EA

Address: 700 US 1 Suite K

North Palm Beach, Fl 33408

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 — Date: 3-15-15

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 — Date: 3 15 15