

P15000053704

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

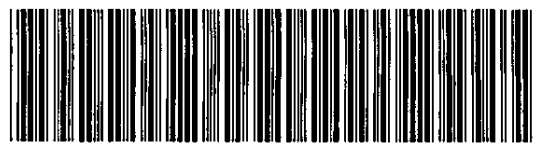
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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06/01/15--01047--022 **78.75

EFFECTIVE DATE 5.27.15

[Handwritten scribble]

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STATE
CLERK
JUN 1 2015

2015 JUN -1 A 10:37

FILED

JUN 24 2015

T SCHROEDER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
15 JUN 22 PM 12:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 3, 2015

DIEGO ALONSO PONCE
360 C LAKEWOOD CIR
MARGATE, FL 33063

SUBJECT: SOCCER ANYONE? INC.
Ref. Number: W15000038815

We have received your document for SOCCER ANYONE? 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 title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://www.sunbiz.org/titledef.html>.

PLEASE LIST THE TITLE FOR THE INITIAL OFFICERS AND/OR DIRECTORS.

Please return 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.

Terri J Schroeder
Regulatory Specialist II

Letter Number: 615A00011667

COVER LETTER

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

SUBJECT: Soccer Anyone? 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: Diego Alonso Ponce
Name (Printed or typed)

360-C Lakewood Cir
Address

Margate, Florida, 33063
City, State & Zip

9548046849
Daytime Telephone number

dponce2@fau.edu
E-mail address: (to be used for future annual report notification)

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

EFFECTIVE DATE 5.27.15

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: Soccer Anyone? Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

360-C Lakewood Cir

Margate, Fl. 33063

USA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To Launch a mobile app for soccer players

The app will be sold, Revenues for displaying advertising, additional services will be charged to customers

AND ANY OTHER LAWFUL ACTIVITY

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Diego Ponce - PRESIDENT

Name and Title:

Address 360-C Lakewood cir

Address:

MArgate, Fl. 33063

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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CLERK 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: Ana Paola Gomez

Address: 360-C Lakewood Cir

Margate, Fl. 33063

DEPARTMENT OF STATE
NOTARIAL DIVISION

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ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Diego Ponce

Address: 360-C Lakewood cir

Margate, Fl. 33063

ARTICLE VIII EFFECTIVE DATE: 05-27-2015

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

05/27/2015

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

05-27-2015

Date