

2/2/14

COVER LETTER

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

SUBJECT: GAME CHANGERS I-DRIVE, 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: KUNG-PO YEN

Name (Printed or typed)

10175 FORTUNE PARKWAY, SUITE 705

Address

JACKSONVILLE, FLORIDA 32256

City, State & Zip

904-260-5571

Daytime Telephone number

BIGEASYCAJUN@YAHOO.COM

E-mail address: (to be used for future annual report notification)

FILED
16 JAN 19 PM 1:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

FILED

ARTICLE I NAME

The name of the corporation shall be: GAME CHANGERS I-DRIVE, INC.

16 JAN 19 PM 1:50

ARTICLE II PRINCIPAL OFFICE

Principal street address
10175 FORTUNE PARKWAY, SUITE 705
JACKSONVILLE, FLORIDA 32256

Mailing address, if different is:
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: STEVE NATICCHIONE-PRESIDENT
Address: 205 KENMONT DRIVE
HOLLY SPRINGS, NORTH CAROLINA
27540

Name and Title: IBRAHIM GUNGOR-VICE PRESIDE
Address: 7815 CHIPWOOD LANE
JACKSONVILLE, FLORIDA
32256

Name and Title: KUNG-PO YEN
Address: SECRETARY/TREASURER
1175 OAK HAMMOCK TRAIL
JACKSONVILLE, FLORIDA 32256

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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: KUNG-PO YEN
Address: 10175 FORTUNE PARKWAY, SUITE 705
JACKSONVILLE, FLORIDA 32256

FILED
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DEPARTMENT OF STATE
JACKSONVILLE, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: KUNG-PO YEN
Address: 10175 FORTUNE PARKWAY, SUITE 705
JACKSONVILLE, FLORIDA 32256

ARTICLE VIII EFFECTIVE DATE:

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

181-7 _____ 1/15/2016
Required Signature/Registered Agent 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.

181-7 _____ 1/15/2016
Required Signature/Incorporator Date