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TALLAHASSEE, FLORIDA

cmd 3/1

COVER LETTER

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

SUBJECT: GOALKEEPERS DEPOT CORP
(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: JUAN CALE
Name (Printed or typed)
9159 SW 157TH CT
Address
MIAMI, FL. 33196
City, State & Zip
786-390-6462
Daytime Telephone number
SALC1711@GMAIL.COM
E-mail address: (to be used for future annual report notification)

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

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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: GOALKEEPERS DEPOT CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

9159 SW 157TH CT
MIAMI, FL. 33196

Mailing address, if different

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 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JUAN CALE-P

Address 9159 SW 157TH CT
MIAMI, FL. 33196

Name and Title: _____

Address: _____

Name and Title: DAVID SIERRA-VP

Address 9159 SW 157TH CT
MIAMI, FL. 33196

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: JUAN CALE _____

Address: 9159 SW 157TH CT _____

MIAMI, FL. 33196 _____

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ARTICLE VII INCORPORATOR

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

Name: JUAN CALE _____

Address: 9159 SW 157TH CT _____

MIAMI, FL. 33196 _____

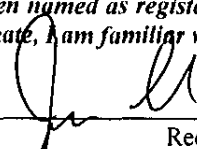
ARTICLE VIII EFFECTIVE DATE:

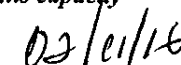
Effective date, if other than the date of filing: _____. (OPTIONAL)

(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

X  _____
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.

X  _____
Required Signature/Incorporator

 _____
Date