

P16000018688

(Requestor's Name)

(Address)

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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 Mailing address, if different
9159 SW 157TH CT
MIAMI, FL. 33196

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 Name and Title: _____
Address 9159 SW 157TH CT Address: _____
MIAMI, FL. 33196

Name and Title: DAVID SIERRA-VP Name and Title: _____
Address 9159 SW 157TH CT Address: _____
MIAMI, FL. 33196

Name and Title: _____ Name and Title: _____
Address _____ 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

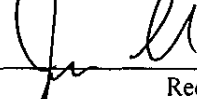
ARTICLE VIII EFFECTIVE DATE:

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.)

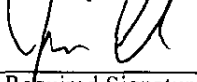
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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  _____ Date 02/01/16

Required Signature/Registered Agent

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  _____ Date 02/11/16

Required Signature/Incorporator