

P16000055355

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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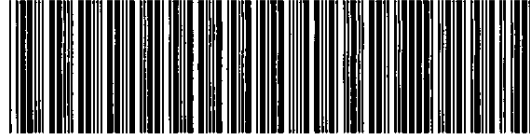
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/27/16--01042--013 **70.00

FILED
16 JUN 27 AM 10:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Witt Tennis Corporation

(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: Devon Witt

Name (Printed or typed)

49 Solana Road

Address

Ponte Vedra Beach, FL 32082

City, State & Zip

~~904-285-7719~~ 904-607-1281

Daytime Telephone number

devonwitt@att.net

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)

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ARTICLE I NAME

The name of the corporation shall be: Witt Tennis Corporation

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

49 Solana Road

Ponte Vedra Beach, FL 32082

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

any and all lawful business allowed in the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Daniel M Witt, Jr, President

Name and Title: Devon Witt, VP and Treasurer

Address 49 Solana Road

Address: 49 Solana Road

Ponte Vedra Beach, FL 32082

Ponte Vedra Beach, FL 32082

Name and Title:

Name and Title:

Address

Address:

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: Devon Witt

Address: 49 Solana Road

Ponte Vedra Beach, FL 32082

ARTICLE VII INCORPORATOR

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

Name: Devon Witt

Address: 49 Solana Road

Ponte Vedra Beach, FL 32082

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: July 1, 2016 (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

Devon Witt
Required Signature/Registered Agent

6/22/16
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.

Devon Witt
Required Signature/Incorporator

6/22/16
Date

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TALLAHASSEE FLORIDA