

P/B 000072770

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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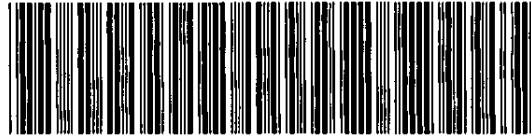
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/29/16--01020--022 **78.75

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 AUG 29 AM 11:17

09/07/16

COVER LETTER

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

SUBJECT: TRAMPOLINE DAN 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
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: DANIEL WEBSTER
Name (Printed or typed)

248 BRAMBLY VINE DR.
Address

SAINT JOHNS, FL 32259
City, State & Zip

(413) 297-0607
Daytime Telephone number

DIVERHOSS527@YAHOO.COM
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: TRAMPOLINE DAN INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is

248 BRAMBLY VINE DR
SAINT JOHNS FL 32259

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Contracted services for fitness classes using trampolines
and various movement patterns through, over and
around obstacles.

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

DANIEL WEBSTER

Name and Title:

DIRECTOR AND HOLDS ALL
CORPORATE OFFICES

Address

248 BRAMBLY VINE DR

Address:

SAINT JOHNS FL 32259

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: DANIEL WEBSTER
Address: 248 BRAMBLY VINE DR
SAINT JOHNS FL 32259

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ARTICLE VII INCORPORATOR

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

Name: DANIEL WEBSTER
Address: 248 BRAMBLY VINE DR
SAINT JOHNS FL 32259

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 5/17/16 (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

Daniel C Webster

Required Signature/Registered Agent

5/17/16

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.

Daniel C Webster

Required Signature/Incorporator

5/17/16

Date