P16000098304

(Requestor's Name)				
(Address)				
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(Cit	y/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			



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SECRETARY OF COLORS

Office Use Only

W16-077504

2/14/16

16 070 19 PD 2: 46

Jackson Cribb Suntree Martial Arts 5 Windjammer Pt Merritt Island, FL 32952 December 11, 2016

To whom it may concern:

This letter is to serve as a Bill of Sale that Suntree Martial Arts has been sold to Eric and Morgan Frechette and the business name has been released to them. If you should have any questions regarding this matter, please feel free to contact me at 321-750-5144.

Sincerely,

Jackson Cribb

Owner

2016 DEC 13 PM 2: 15



November 16, 2016

ERIC FRECHETTE 2955 PINEDA PLAZA WAY, STE. 120 MELBOURNE, FL 32940

SUBJECT: SUNTREE MARTIAL ARTS CORP.

Ref. Number: W16000077504

We have received your document for SUNTREE MARTIAL ARTS CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The document number of the name conflict is L15000037083.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 016A00024565

COVER LETTER

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

SUBJECT: SUNTR	EE MARTIAL ARTS CORP.		
Sobile 1.	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	i 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 CO	PY REQUIRED
FROM:	IC FRECHETTE Nam 5 PINEDA PLAZA WAY SUITE 1	e (Printed or typed)	
		Address	
ME	LBOURNE, FLORIDA 32940		
	City	, State & Zip	
386	-547-5626		
	Daytime 7	Telephone number	
EFF	RECHETTE@PALMBAYFORD.C	ОМ	
	E-mail address: (to be use	d 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)

<u>ARTICLE II PRIN</u>	Principal <u>street</u> address		Mailing address, if different is:	
1955 PINEDA PLAZA	WAY SUITE 120	190 STE	EWART DR	
MELBOURNE, FL 32940		MERRI	TT ISLAND, FL 32952	
ARTICLE III PURP The purpose for which	OSE the corporation is organized is:	L ART TRAINING		
			22	SE SE
			OEC .	15.K
			<u></u>	77
			7	10 <u>-</u> 10 11 11 12 11
			2: -	
			U U	
ARTICLE IV SHAR The number of shares of	stock is:			
The number of shares of	Stock is: AL OFFICERS AND/OR DIRECTORS ERIC ERECHETTE/PRESIDENT	Name and Titl Address:	e: 190 STEWART DR	<u>.</u>
The number of shares of ARTICLE V INITIAN Name and Title	Stock is: AL OFFICERS AND/OR DIRECTORS ERIC FRECHETTE/PRESIDENT E		e:	
The number of shares of ARTICLE V INITIAN Name and Title Address	Stock is: 4L OFFICERS AND/OR DIRECTORS ERIC FRECHETTE/PRESIDENT 190 SEWART DR MERRITT ISL, FL 32952 ANTHONY RODRIGHEZ/SENSI		e: 190 STEWART DR MERRITT ISLAND, FL 32952 ERIN RODRIGUEZ/OFFICE M	
The number of shares of ARTICLE V INITIAN Name and Title Address Name and Title Name and Title	AL OFFICERS AND/OR DIRECTORS ERIC FRECHETTE/PRESIDENT 190 SEWART DR MERRITT ISL, FL 32952 ANTHONY RODRIGUEZ/SENSI	Address: Name and Titl	e: 190 STEWART DR MERRITT ISLAND, FL 32952 ERIN RODRIGUEZ/OFFICE M	
The number of shares of ARTICLE V INITIAN Name and Title Address	AL OFFICERS AND/OR DIRECTORS ERIC FRECHETTE/PRESIDENT 190 SEWART DR MERRITT ISL, FL 32952 ANTHONY RODRIGUEZ/SENSI	Address:	e: 190 STEWART DR MERRITT ISLAND, FL 32952 e: ERIN RODRIGUEZ/OFFICE M	
The number of shares of ARTICLE V INITIAN Name and Title Address Name and Title Name and Title	AL OFFICERS AND/OR DIRECTORS ERIC FRECHETTE/PRESIDENT 190 SEWART DR MERRITT ISL, FL 32952 ANTHONY RODRIGUEZ/SENSI 1074 ROLLING ROCK DR	Address: Name and Titl Address:	e: 190 STEWART DR MERRITT ISLAND, FL 32952 e: ERIN RODRIGUEZ/OFFICE M 1074 ROLLING ROCK DR	IGR
The number of shares of ARTICLE V INITIAN Name and Title Address Name and Title Address	AL OFFICERS AND/OR DIRECTORS ERIC FRECHETTE/PRESIDENT 190 SEWART DR MERRITT ISL, FL 32952 ANTHONY RODRIGUEZ/SENSI 1074 ROLLING ROCK DR MELBOURNE, FL 32934	Address: Name and Titl Address:	e: 190 STEWART DR MERRITT ISLAND, FL 32952 e: ERIN RODRIGUEZ/OFFICE M 1074 ROLLING ROCK DR MELBOURNE, FL 32934	IGR

Name ar	nd Title:	Name and Title:	
Addres	s	Address:	
	· · · · · · · · · · · · · · · · · · ·		
	REGISTERED AGENT Torida street address (P.O. Box NOT accepta	hla) of the veriftered poort is:	
	ERC FRECHETE	pie) of the registered agent is.	
Name:	190 STEWART DR	,,,,,	
Address:			20 20
	MERRITT ISLAND, FL 32952		SECRE II ZISION O 2016 DEC
			ميد مشل احت
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>		5 3 K
The <u>name and a</u>	address of the Incorporator is:		
Name:	ERIN RODRIGUEZ		5 <u>%</u>
Address:	1074 ROLLING ROCK DR		<u> </u>
	MELBOURNE, FL 32934	-	
	EFFECTIVE DATE: 12/01/2016	OPTION	JAT V
	f other than the date of filing:	. (OPTION cannot be more than five da	
filing.)	,		
	te inserted in this block does not meet the appl		ments, this date will not be listed as
the document's	effective date on the Department of State's re-	cords.	
Having been no	amed as registered agent to accept service of p	process for the above stated co	orporation at the place designated in
this certificate.	I am familiar with and accept the appointmen	as registered agent and agree	e to act in this capacity
240			11/09/2016
	Required Signature/Registered Age	nt	Date
	ocument and affirm that the facts stated here e Department of State constitutes a third degre		
ج	in Balinaina		11/09/2016
Reg	uired Signature/Incorporator		Date