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	Division of Co	rporations		
	Fax Number	: (850)617-6381		
From:				
	Account Name	: C T CORPORATION S	YSTEM	
		: FCA000000023		
	Phone	: (614)280-3338		
		: (954)208-0845		
			entity to be used for f email address please.**	
Em	ail Address:		· · · · · · · · · · · · · · · · · · ·	
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	FLORIDA PRO	OFIT/NON PROF	T CORPORATION	
•	Mo Va	ughn Baseball Ac	idemy, Inc.	S
	Certificate of	Status	0	TAL
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Electronic Filing Menu

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Corporate Filing Menu

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

F	TPAL OFFICE		
	Principal street address	Ma	illing address, if different is
Saint Anne's Driv	e		
Raton, FL 33496			
<u>CLEIII PURP</u>	<u>2SE</u> any lease the corporation is organized is:	gal purpose.	
irpose for which i	ne corporation is organized is:		· • ·
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unber of shares of	<u>ES</u> 1 stock is:		
<u>CLE V INITLA</u>	I. OFFICERS AND/OR DIRECTO	<u>85</u>	
<u>CLE V INITLA</u>	II. OFFICERS AND/OR DIRECTOL Maurice S. Vaughn	<u>RS</u> Name and Title:	
<u>CLE V INITLA</u>	I. OFFICERS AND/OR DIRECTO	<u>RS</u> Name and Title:	
<u>CLE VINITIA</u> Name and Title	II. OFFICERS AND/OR DIRECTOL Maurice S. Vaughn	<u>RS</u> Name and Title:	
<u>CLE VINITIA</u> Name and Title	I. OFFICERS AND/OR DIRECTOR Maurice S. Vaughn 3182 Saim Anne's Dr.	<u>RS</u> Name and Title:	
<u>CLE VINITIA</u> Name and Title	I. OFFICERS AND/OR DIRECTOR Maurice S. Vaughn 3182 Saim Anne's Dr.		
<u>CLE V INITIA</u> Name and Title Address	I. OFFICERS AND/OR DIRECTOR Maurice S. Vaughn 3182 Saint Anne's Dr. Boca Raton, Florida 33496		
<u>CLE V INITIA</u> Name and Title Address	I. OFFICERS AND/OR DIRECTOR Maurice S. Vaughn 3182 Saim Anne's Dr. Boca Raton, Florida 33496		
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Name and Title:_	·	Name and Title:	<u> </u>
Address _		Address:	
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ARTICLE VI REGISTERED AGENT

The name and Floridn street address (P.O. Box NOT acceptable) of the registered agent is:

Name:	CT Corporation System	
Address	1200 S. Pine Island Dr. #250	
	Plantation, Florida 33324	

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is,

Name:	Scot C. Crow	
Address	150 E. Gay Street, Suite 2400	
	Columbus, OH 43215	

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 days prior or 90 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

Stephance Honey.	

Stephanie Hencz Assistant Secretary Required Signanare/Registered Agent

1/3/2019 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.



01/03/2019

Required Signature/Incorporator

Date