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Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
MMA MASTERS BACK TO BASICS INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	$78.75

JUL 02 2020

T. SCOTT

Electronic Filing Menu Corporate Filing Menu Help

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: MMA MASTERS BACK TO BASICS INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

7245 NW 25TH STREET
MIAMI, FL 33122

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ALL LEGAL PURPOSES, MIXED MARTIAL ARTS TRAINING

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOSE VAZQUEZ, PTS

Address 7245 NW 25TH STREET
MIAMI, FLORIDA 33122

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

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TALLAHASSEE, FLORIDA

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: VIDAL FINANCIAL INC

Address: 2000 S DIXIE HIGHWAY #205

MIAMI FL 33133

ARTICLE VII INCORPORATOR

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

Name: VIDAL FINANCIAL INC

Address: 2000 S DIXIE HIGHWAY #205

MIAMI FL 33133

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

_____ 6/30/2020

Required Signature/Registered Agent 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.

_____ 6/30/2020

Required Signature/Incorporator Date