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Florida Department of State
Division of Corporations
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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
COMMERCIAL SERVICES

FLORIDA PROFIT/NON PROFIT CORPORATION

Lacrosse Nation Store, Inc

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
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Electronic Filing Menu

Corporate Filing Menu

Help

SECRETARY OF STATE
TALLAHASSEE, FL

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ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: Lacrosse Nation Store, Inc**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

11713 Glen Wessex Ct11713 Glen Wessex CtTampa, FL 33626Tampa, FL 33626**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: Lacrosse Equipment Sales**ARTICLE IV SHARES**The number of shares of stock is: 200**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Lorenzo Mastrandrea, Director

Name and Title: _____

Address 11713 Glen Wessex Ct

Address: _____

Tampa, FL 33626

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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 TALLAHASSEE, FL

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: Lorenzo Mastrandrea
 Address: 11713 Glen Wessex Ct
Tampa, FL 33626

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Lorenzo Mastrandrea
 Address: 11713 Glen Wessex Ct
Tampa, FL 33626

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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.



Required Signature/Registered Agent

5/30/2023
 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.



Required Signature/Incorporator

5/30/2023
 Date