

A23000056686

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

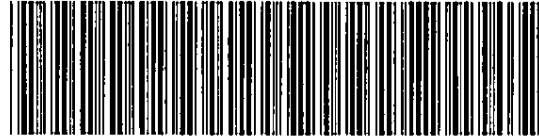
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700411487877

08/02/2023 11:01:01 001

RECEIVED  
2023 AUG -2 PM 2:34  
SOUTH FLORIDA  
TALLAHASSEE, FLORIDA

2023 AUG -2 PM 5:30

## COVER LETTER

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

National Soccer League, Inc.

**SUBJECT:** \_\_\_\_\_  
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed is 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

**ADDITIONAL COPY REQUIRED**

FROM: \_\_\_\_\_  
Name (Printed or typed)

7900 N.W. 27TH. AVE NUE. STE. A04A

\_\_\_\_\_  
Address

MIAMI, FL 33147

\_\_\_\_\_  
City, State & Zip

786-344-3705 or 954-997-8 413

\_\_\_\_\_  
Daytime Telephone number

trusteeinc@gmail.com or royalacademys@gmail.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)

## ARTICLE I NAME

The name of the corporation shall be: National Soccer League, Inc.

## ARTICLE II PRINCIPAL OFFICE

Principal street address  
835 N.W. 198th St. #C  
Miami Gardens, FL  
33169

Mailing address, if different is:

P.O. Box 381134  
Miami, FL 33238

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To uphold the highest standards of Sportmanship, and Athletic professionalism, within the Soccer industry world wide. It salutes its cross-culture, heritage, and iconic coaches and players, that pave the way for novice youth and future players.

Through the Recruitment, invitation and hiring of national and global players; assembling and centering teams; conducting workshop friendly matches/games, and centering future professional players, they

## ARTICLE IV SHARES

The number of shares of stock is: 1000

the 24K Is the Canario Global Accreditation and help with maintenance. Acts and Scholarships for youth.

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Cristian Ortuzar

Address: Fdr/Pres/CEO/Coach

835 N.W. 198th St. #C

Miami Gardens, FL 33169

Name and Title: Augusto Saintphard-Phd.

Address: 2VP/Adm. Med.

835 N.W. 198th St. #C

Miami Gardens, FL

33169

Name and Title: LORNA R. Shuford, 1VP/Sch.

Address: 835 N.W. 198th St. #C

Miami Gardens, FL 33169

Name and Title: Kevin Lopez/Coach/Adm. Tech Dir.

Address: 835 N.W. 198th St. #C

Miami Gardens, FL 33169

Name and Title: Mario Benitez, 2VP-Adm. Coach

Address: 835 N.W. 198th St. #C

Miami Gardens, FL 33169

Name and Title: Lynn William-RN/Adm.

Address: Youth Coach

835 N.W. 198th St. #C

Miami Gardens, FL 33169

Name and Title: Barla Lartino.  
Address: Adm. Sales & Vendor Dir.  
835 N.W. 198<sup>th</sup> St. #C  
Miami, FL 33169

Name and Title: Lizeth Guevara  
Address: Adm. Assist / PR. Dir  
835 N.W. 198<sup>th</sup> St. #C  
Miami Gardens, FL 33169

**ARTICLE VI REGISTERED AGENT**

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

Name: Trustee Inc  
Address: 7900 N.W. 27<sup>th</sup> Ave. Ste A04A  
Miami, FL 33147

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: LORNA SHUFORD  
Address: 835 N.W. 198<sup>th</sup> St. #C  
Miami Gardens FL 33169

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 08/02/2023 (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

08/01/2023  
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

08/01/2023  
Date

2023 AUG - 1 PM 5:30