

P24000074836

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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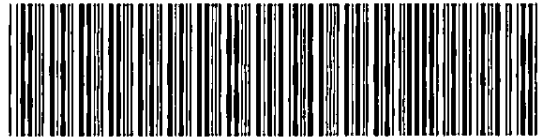
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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12/06/24--01019--008 **87.50

J.S.H. 12/24

COVER LETTER

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

SUBJECT: Jim Thorpe Golf Academy Inc.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Jimmie L. Thorpe

Name (Printed or typed)

1612 Kersley Circle

Address

Heathrow, Florida 32746

City, State & Zip

(407)474-0005

Daytime Telephone number

Jimthorpegolf@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: Jim Thorpe Golf Academy Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

1612 Kersley Circle
Heathrow, Florida 32746

Mailing address, if different is:

1612 Kersley Circle
Heathrow, Florida 32746

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To teach the rules, regulations, and techniques of the game
of golf. Teach the written and unwritten rules of golf courses. Work on correction of bad habits while
playing. Introduce children of all ages into a wholesome fulfilling pastime that can produce limitless
advantages.

ARTICLE IV SHARES

The number of shares of stock is: 30

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jimmie Thorpe, President

Name and Title: _____

Address 1612 Kersley Circle
Heathrow, Florida 32746

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: Carol Thorpe

Address: 1612 Kersley Circle
Heathrow, Florida 32746

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jimmie L. Thorpe

Address: 1612 Kersley Circle
Heathrow, Florida 32746

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.)

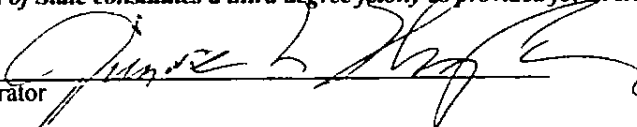
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Carol Thorpe 
Required Signature/Registered Agent

11/30/2024
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.

Jimmie L. Thorpe 
Required Signature/Incorporator

11/30/2024
Date