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TRANSMITTAL LETTER

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

7'000000011'6'69001'1'0'7' -05/20/96--01064--004 -****122,50 *****122,50

Proposed corporated name - must include suffix) Enclosed is an original and one (1) copy of the articles of incorporation and a check for: \$70.00 \$78.75 \$122.50 \$131.25 Filing Fee Filing Fee Filing Fee, Certified Copy & Certificate Filing Foo & Certificate & Certified Copy Additional Copy Required FROM: michael H. mcLeon Name (printed or typed) 10095 Collins Hole Rd 904-922-0230 Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

N 1 20 PN 3: 05

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Capital City / mike mchevol Baseball School, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

10095 Collins Hole Rd. Tullahassee, Fl 32312

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

michael H. McLeod 10095 Collins Hole Rd. Tallohassee, Fl 32312

INCORPORATOR(S) ARTICLE V

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Michael H. McLeod 10095 Collins Hola Rd. Tall. Fl 32312	president
Rose m. mcLeval 10095 Collins Hole Rd. Tall, Fl 32312	Secretary
Leslie mekend 1906 W. Welson Cir. Tallahasse, 1=1 32303 The undersigned incorporator(s) has(have) executed these A	Tresurer Articles of Incorporation this
Muhal H. Mered Signature Signature Signature	

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

Signature

avidenti (m. 1747). Avidenti (m. 1747).

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

t.	The	name	of the	corporation	ie.
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Capital City / mike molecul Baseball School, Inc.

2. The name and address of the registered agent and office is:

Michael H. McLood
(NAME)

10095 Collins Hole Rol.
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

Tellahesses F1 323/2
(CITY/STATEZIP)

Having been named us registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Muhan M. M. College (SIGNATURE)

5/20/96 (DATE)