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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I200000000019 : (305)552-5973 Phone : (305)675-5944 Fax Number

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## FLORIDA PROFIT/NON PROFIT CORPORATION FUTSAL PLAY MIAMI CORP

Certificate of Status	0
Certified Copy	t
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Electronic Filing Menu Corporate Filing Menu

Help

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

FUTSAL PLAY MIAMI CORD	
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	
FI	
ARTICLE III SHARES: The number of shares of stock is:	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:  MATICAL DIRECTORS AND/OR OR OFFICERS:  MATICAL DIRECTORS AND/OR OR OFFICERS:  MATICAL DIRECTORS AND/OR OR O	
The name and Florida street address (PO Box not acceptable) of the registered agent is:	: ::::::::::::::::::::::::::::::::::::
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:  MARCOS ALCXANDRE DE GODOY  7661 NW 107TH AVE DE 612 - DOWL - 33178	ņ.

## Required Signatures:

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

Registered Agent

2/4/25 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 3.817.155, F.S.

incorporator

2/4/25 Date