

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : GERALD WEINBERG, P.C.  
Account Number : I20030000043  
Phone : (800)342-9856  
Fax Number : (800)354-3381

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION  
EA SPORTS CARDS CORP.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FL

2023 MAR 15 AM 12:45

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*Handwritten initials*

Mar. 15, 2023 12:11PM

(GEALD WEINBERG 098861 3)

Vol. 7889 P. 23

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: EA SPORTS CARDS CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address

3755 SHADY RUN ROAD

MELBOURNE, FL 32934

Mailing address, if different is:

3755 SHADY RUN ROAD

MELBOURNE, FL 32934

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ESTEBAN ALVAREZ, P

Name and Title: \_\_\_\_\_

Address 3755 SHADY RUN ROAD

Address: \_\_\_\_\_

MELBOURNE, FL 32934

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

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GEALD WEINBERG

(H230000098861 3)

Mar 15, 2023 12:11 PM

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: ESTEBAN ALVAREZ  
Address: 3755 SHADY RUN ROAD  
MELBOURNE, FL 32934

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

Name: LAWRENCE A. KIRSCH  
Address: 41 STATE STREET, SUITE 700  
ALBANY, NEW YORK 12207

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TALLAHASSEE, FL

**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*

13/Esteban Alvarez  
Required Signature/Registered Agent

03/15/2023  
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.*

Lawrence A. Kirsch  
Required Signature/Incorporator

03/15/2023  
Date

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