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| (Re | equestor's Name) | |
| (Ad | ldress) | |
| (| (4,000) | |
| (Ad | dress) | |
| | | |
| (Cit | ty/State/Zip/Phone | = #) |
| PICK-UP | ☐ WAIT | MAIL |
| Ф., | siness Entity Nan | |
| (Bu | siness Entity Nam | ie) |
| (Do | cument Number) | |
| | | |
| Certified Copies | Certificates | of Status |
| | | |
| Special Instructions to I | Filing Officer: | |
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11 OCT -3 AM 4 OR

SECRETARY OF STATE

7.

COVER LETTER

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

| SUBJECT: 80 | mand Marina (PROPOSED CORPORATI | Condo miniu | m Association | in Inc. | | |
|--|--|-------------------------------------|---|---------|--|--|
| | | | | | | |
| Enclosed is an original a \$70.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy | \$87.50 Filing Fee, Certified Copy & Certificate OPY REQUIRED | | | |
| FROM: Robin Zimmer man Name (Printed or typed) | | | | | | |
| | 414 80th St | dress | | | | |
| Holmes Beach, FL 34217 | | | | | | |

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

941-524-4741 Daytime Telephone number

robinzimm 3 @ aol. com E-mail address: (to be used for future annual report notification)

PAGE 3 OF 4

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

| ARTICLE I NAME The name of the corporation | E on shall be: 80th and Mau | rina Condominium A | association Inc |
|--|---|---|--------------------------|
| | Principal street address 414 80 +h St Holmes Beach FL 3421 | Mailing address | • |
| ARTICLE III PUR | POSE | | |
| The purpose for which the | e corporation is organized is: | | |
| create | a nongrofit cond | ominum associa | tion |
| ARTICLE IV MAN | INER OF ELECTION The manner in w | high the directors are elected and annointed | 4. |
| | rovided for in the k | | μ ι |
| Name and Title: | TIAL OFFICERS AND/OR DIRECTOR Schinklimmen Man Birthy 144 Both St Johnes Beach, FL | S Procidost | |
| | 34217 | Oncidant - | |
| | udith A. Menchek Vice 26 Linvale Rd lingues, N.T. 08551 | Regident Name and Title: Address: | |
| Address: 5 | my Barrett officer 5802 Cannonade Ct Awstin TX | Name and Title:Address: | |
| | 78746 | | <u> </u> |
| ARTICLE VI REGI | ISTERED AGENT | | OCT SION |
| | reet address (P.O. Box NOT acceptable) of the Barry L. Gowld 530 67 th St Holmes Beach, FL 3421 | ne registered agent is: | INLED STATES OF CORPORAT |
| ARTICLE VII INCO | ORPORATOR | | |
| The name and address of Name: Address: | the Incorporator is: Robin J. Zimmerma 414 90 th St Holmes Beach, FL 34 | | - |
| certificate, I am familiar w | registered agent to accept service of process with and accept the appointment as registered \[\int \] | for the above stated corporation at the agent and agree to act in this capacity | |
| July J | Required Signature of Registered Agent | Sept 23, | Date |
| to the Department of State | nd affirm that the facts stated herein are true e constitutes a third degree felony as provided | | submitted in a document |
| Koliny | Required Signature of Incorporator | | 7-3,2011 Date |