

N17000002525

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

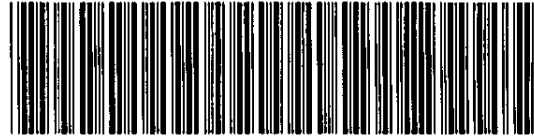
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Palm Court / Palm Tower Resident Council, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

\$70.00
Filing Fee

\$78.75
Filing Fee &
Certificate of
Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: ELLA ELAM
Name (Printed or typed)

930 NW 95th St. # 305
Address

Miami, Florida 33150
City, State & Zip

305-694-3074
Daytime Telephone number

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 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: Palm Court/Tower Resident Council, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

_____	_____
_____	_____
_____	_____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To advocate for the social, educational and economic opportunities of residents of Edison Courts.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Initial by
popular vote. Elections are held every three (3) years.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ella Elam, President
Address: 930 NW 95th St., #305
Miami, FL 33150

Name and Title: Gloria Bennett, Recording Secretary
Address: 930 NW 95th St., #301
Miami, FL 33150

Name and Title: Eva Barone, Vice-President
Address: 930 NW 95th St., #501
Miami, FL 33150

Name and Title: Noreida Diaz, Corresp. Secretary
Address: 930 NW 95th St., #302
Miami, FL 33150

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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TALLAHASSEE, FLORIDA

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: ELLA M. ELAM
Address: 930 NW 95th St, #305
Miami, FL 33150

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ELLA M. ELAM
Address: 930 NW 95th St #305
Miami, FL 33150

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

Ella M. Elam _____ 12/6/16
Required Signature of Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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.

Ella M. Elam _____ 12/6/16
Required Signature of Incorporator Date