ŽARUS CORPORATE FILING SERVICE (Requestor's Name) 3320 S.W. 87 AVENUE (Address) MIAMI, FLORIDA (305)552-5973 \*\*\*\*\*78.75 \*\*\*\*\*78.75 (City, State, Zip) TERESA ROMAN (TALLAHASSEE REPRESENTATIVE) OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): O ASSOCIATION, (Corporation Name) (Document #) (Document #) (Corporation Name) (Document #) (Corporation Name) Certified Copy Pick up time ₩alk in Certificate of Status Will wait Photocopy Mail out AMENDMENTS NEW FILINGS Amendment Profit Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other Examiner's Initials



Katherine Harris Secretary of State

December 7, 2000

**LAZARUS** 

MIAMI, FL

SUBJECT: HACIENDA IN GABLES CONDO ASSOCIATION, INC.

Ref. Number: W00000028844

We have received your document for HACIENDA IN GABLES CONDO ASSOCIATION, INC.. However, the document has not been filed and is being returned for the following:

Section 617.0803, Florida Statutes, requires that the board of directors never have fewer than three directors.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6934.

Loria Poole Corporate Specialist

Letter Number: 500A00061988





**FOR** 



HACIENDA IN GABLES COMBO HISSOCIATION, INC.
The undersigned, acting as incorporator(s) of a corporation pursuant to chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation:

#### ARTICLE I NAME:

The name of the corporation shall be:

HACIENUA IN GASHES COMDO ASSOCIATION, INC.

## ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

The principal and mailing address of this corporation is:

1400 SALZEDO ST. SVITE 110 CORAL BABLES, FLA. 33134

## ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is (are):

A ASSOCIATION TO JAMES FUNDS FOR MAINTENANCE, INSURANCE, LIABILITY, PRINTING AND OTHER TYPE OF SERVICE NEEDED TO HAINTHIN THE BUILDING

## ARTICLE IV MANNER OF ELECTIONS OF DIRECTORS:

The manner in which the directors are elected or appointed is as follows:

BY THE BY-LAWS

### ARTICLE V LIMITATION OF CORPORATE POWERS

The corporate powers of this corporation are as provided the section 617.0302, Florida Statutes, unless limited as follows:

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS PEDRO VILLAR 1400 SALZEDO ST. svite 110 COLAL GABLET, FTA, 33134 ARTICLE VII DIRECTORS (must have the minimum of three directors): NAME AND ADDRESS

PEDRO E. VILLAR, PR-D PEORO VILLAR, VP-SEC-D OLGA VILLAR, TREASURER-D

1400 SALZEDOST.#-110 Composited, F/A. 33/34

ARTICLE VIII INCORPORATOR

The name and street address of the incorporator for these Article of Incorporator is: FEDED VILLAR

1400 SALZEDO ST. # 110

CORAL GABLES, FIA. 33/34

The undersigned incorporator has executed these Articles of Incorporation this Lagrange day of Lagrange 1, 2009.

signature

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE LINDERSIGNED 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.
1. The name of the corporation is:
HACIENDA IN CHELES COMOS ASSOCIATIONS, INC. (must include suffix)
2. The name and address of the registered agent and office is:
PEDRO VILLAR (NAME)
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)
COURT GASTES, FIA, 33/34 (CITY/STATE/ZIP)
Having been named as 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.

(SIGNATURE)