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(Business Entity Name)

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TRANSMITTAL LETTER

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

SUBJECT: Coastal Towers Seniors Club, 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: Hildegard Zirker
Name (Printed or typed)

400 Kings Point Drive
Address

Sunny Isles Beach, FL 33160
City, State & Zip

305 - 945 - 1843
Daytime Telephone number

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:

Coastal Towers Seniors Club, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

400 Kings Point Drive
Sunny Isles Beach, FL 33160

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To conduct non profit social entertainment.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Selection by Members.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

Marsha levine, President	400 Kings Point Drive, Sunny Isles Beach, FL 33160
Hildegard Zirker, Treasurer	400 Kings Point Drive, Sunny Isles Beach, FL 33160
Elsie Goodman, Director	400 Kings Point Drive, Sunny Isles Beach, FL 33160

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the registered agent is:

Hildegard Zirker
400 Kings Point Drive, Sunny Isles Beach, FL 33160

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Marsha Levine
400 Kings Point Drive, Sunny Isles Beach, FL 33160

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.

Hildegard Zirker (HZ)
Signature/Registered Agent

12/29/03
Date

Marsha Levine (ML)
Signature/Incorporator

12/29/03
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA