N0500000 2/22

(Red	questor's Name)	
(Add	dress)	
`	•	
		
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
/Dua	inna Fakika klau	
(Bus	iness Entity Nan	nej
(Doc	cument Number)	
Certified Copies	_Certificates	of Status
, 	. –	
		
Special Instructions to F	iling Officer:	
		}
		1
•		
:		ì

Office Use Only

D. WHITE MAR - 2 2005



600047011856

03/01/05--01029--012 **78.75

RECEIVED

OSMR-1 PHIL: 12

BISTIAN - I A STU

	•	
OFFICE USE ONLY(DOCUMENT #)		
LAZARUS CORPORATE FILING SERVICE		
3320 S.W. 87 AVENUE		
MIAMI, FLORIDA (305)552-5973		
	OFFICE USE ONLY	
	011102 001.0112	
CORPORATION NAME(S) & DOCUMENT NUMI	BER(S) (if known):	
1. WEST CHESTER FIRST (Corporation Name)	COPLITION CORP	
2.	(Bocalitatic #)	
(Corporation Name)	(Document #)	
3. (Corporation Name)	(Document #)	
4. (Corporation Name)		
	(Document #)	
Walk in Pick up time 2.60	Certified Copy	
Mail out Will wait Photocopy	Certificate of Status	
NEW FILINGS AMENDMI	ENTS	
Profit Amendment	Amendment	
NonProfit Resignation of R	Resignation of R.A., Officer/Director	
. Limited Liability Change of Registe	Change of Registered Agent	
Domestication Dissolution/Withd	Dissolution/Withdrawal	
Other Merger		
	·	
OTHER FILIGS REGISTRATIO QUALIFICATIO		
Annual Report Foreign	A reserving	
Fictitious Name Limited Partnersh	າ່າຕ	
Name Reservation Reinstatement		
Trademark		
Other	Francis and Triffield	

Examiner's Initials

CR2E031(9/92)

FILED

ARTICLES OF INCORPORATION

2005 MAR -1 A 8: 45

FOR

TALLAMASSEE, FLORIDA

WESTCHESTER FIRST CONCITION GORP.

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:

WESTONESTER FIRST COALITION COPP.

ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

The principal and mailing address of this corporation is:

820 S.W. 89TH AVE MIAMI, FL 33174

ARTICLE III PURPOSE (S)

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

TO PROTECT, PRESERVE AND DEFEND THE QUALITY OF LIFE IN THE NEIGHBORHOOD KNOWN AS WESTCHESTER IN MIAMI-DADE COUNTY, FLORIDA

ARTICLE IV MANNER OF ELECTIONS OF DIRECTORS:

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

By THE BICHOUS

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

LYDIA PEREZ 820 S.W. 89TH AVE MIRMI, Fr. 33174

ARTICLE VII DIRECTORS (must have the minimum of three directors): NAME AND **ADDRESS**

LYDIA PEREZ - DIRECTOR 800 S.W. 89 TH ANG. MIAMI, F. J.

ALESANDRO ACOSTA - DIRECTOR 8970 S.W. 9 TEM. MIAMI, F. 3317

PEDRO LACAU - DIRECTOR 8983 S.W. 9 TEM. MIAMI, F. 3317

ARTURO ACKITUNO - DIRECTOR 8320 MILLER DILIVE, MIAMI, F. 33

ARTICLE VIII INCORPORATOR

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

LYDIA PEREZ 820 56. 89 TH AVE. MINM, FE 33174

The undersigned incorporator has executed these Articles of Incorporation this aday of FER, 2005

FILED

CERTIFICATE OF DESIGNATION OF 2005 MAR -1 A 8: 45

REGISTERED AGENT/REGISTERED OFFICE
TALLAHASSEE FORIDA
PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE ORIDA UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERERD AGENT, IN THE STATE OF FLORIDA.

The name of the corporation is:

WESTCHESTER FIRST COALITION CORP.
(must includes suffix)
The name and address of the registered agent and office is:
LYDIA PEREZ
(name)
820 S.W. 89 TH AVE
(P.O. Box or Mail Drop Box NOT Acceptable)
MIAMI, FL 33174
(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 appointed 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
Signature of Registered Agent 2/28/05
Signature of Registered Agent / Pate