

NO5000006236

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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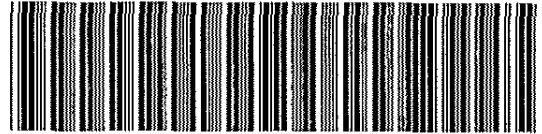
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05 JUN 16 PM 2:38

SECRETARY OF STATE
TALLAHASSEE, FL 32399

6/16/05
SJT

TRANSMITTAL LETTER

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

SUBJECT: Italian Americans of Florida, 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: Barbara S. Lee
Name (Printed or typed)

6405 NW 36th Street, Suite 250
Address

Miami, FL 33166
City, State & Zip

(305) 871-8090
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:

Italian Americans of Florida, Inc.

ARTICLE II PRINCIPAL OFFICE

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

16393 NW 11th Street, Pembroke Pines, FL 33028

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Fraternal-charitable activities

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

general election from and by members

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Jerry Cristodero, President, 16393 NW 11th Street, Pembroke Pines, FL 33028
Barbara S. Lee, Secretary, 6405 NW 36th Street, #250, Miami, FL 33166

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Barbara S. Lee
6405 NW 36th Street, #250, Miami, FL 33166

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Barbara S. Lee
6405 NW 36th Street, #250, Miami, FL 33166

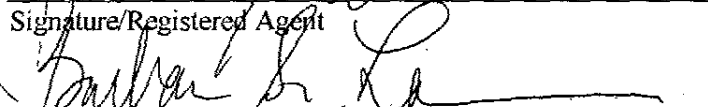
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.



Signature/Registered Agent

6/14/05

Date



Signature/Incorporator

6/14/05

Date