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(Red	questor's Name)			
(Add	dress)			
(Add	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAJL		
(Business Entity Name)				
(Do	cument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



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10/24/05

COVER LETTER

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

SUBJECT: Miramar Apartments Condominium, Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original a	and one(1) copy of the Artic	cles of Incorporation and a	a check for:
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	
		ADDITIONAL CO	PY REQUIRED
FROM:	American Condominion Name (P	um Management, Inc	- .
	909 SE 47th Terrace Address		
	Cape Coral, FL 339	04 State & Zip	

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

ARTICLES OF *NCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I · NAME

FILED

The name of the corporation shall be:

05 OCT 21 AM 9: 45

Miramar Apartments Condominium, Inc.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

American Condominium Management, Inc , 909 SE 47th Terrace #105, Cape Coral, FL 33904

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To act as a governing body for the operations of the condominium.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Officers shall be elected at each annual meeting of the Board of Directors, and shall hold office at the pleasure of the Board of Directors.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Lawrence Falasco

Mike Bowie

Anita Brown

109 SE 41st Terrace

27 Kitefield Rd

4901 Victoria Dr #108

Cape Coral, FL 33904

Rockport, MA 01966

Cape Coral, FL 33904

President

Vice-President

Secretary/Treasurer

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Susan Kase, 909 SE 47th Terrace #105, Cape Coral, FL 33904

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael Fronce, 1727 SE 12th Terrace, Cape Coral, FL 33990

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

10118105 Date

Signature/Incorporator

Date