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Examiner's Initials

CORPORATION NAME	E(S) & DOCUME	NT NUMBER(S), (if	known):	
INIEV	SPECE	TOWNALT	ACCOMMETIN	1 16.0

1. HALEY SUFER	E TENANT	ASSOCIATION INC.
(Corporation Name)	(Document #)	
Walk in Pick up time Mail out Will wait	⊋.οΟ □ Photocopy	Certified Copy Certificate of Status
Profit Not for Profit Limited Liability Domestication Other OTHER FILINGS	AMENDMENTS Amendment Resignation of Change of Regi Dissolution/Wi Merger REGISTRATION/	istered Agent
Annual Report Fictitious Name	Foreign Limited Partner Reinstatement Trademark Other	rship

CR2E031(7/97)



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 18, 2006

LAZARUS

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SUBJECT: HALEY SOFGE TENANT ASSOCIATION INC Ref. Number: W06000031835

We have received your document for HALEY SOFGE TENANT ASSOCIATION INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

There was not an article with the registered agents name and address.,

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) 245-6925.

Cynthia Blalock Document Specialist New Filing Section

Letter Number: 906A00045916

ARTICLES OF INCORPORATION In compliance with Chapter 617, FS., (Not for Profit)

FOR

HALEY SOFGE TENANT ASSOCIATION INC

The undersigned, acting as incorporator of a Non-Profit Corporation, pursuant to chapter 501 [©] and or Chapter 617 [©] Florida Statutes, adopt the following Articles of Incorporation:

ARTICLE I, NAME

The name of the corporation shall be:

HALEY SOFGE TENANT ASSOCIATION INC

ARTICLE II, PRINCIPAL PLACE AND MAILING ADDRESS

The principal and mailing address of this corporation is:

750 NW 13th Avenue, Apt. 407 Miami, Florida, 33125

ARTICLE III PURPOSE (S)

The purpose of the organization shall be to strive to improve conditions of life at the Miami-Dade Housing Agency (hereafter to be recognized as MDHA), to develop a sense of community among the residents: to actively participate in the decisions that affect the residents.

ARTICLE IV - MANNER OF ELECTION

The Directors shall be elected by direct voting members on electron mass meeting, placed at the Association Office Address.

ARTICLE V - Names, Address and Titles of the Officers

Lenine M. Ibanez

750 NW 13 th Avenue, Apt. 407

President

Miami, Florida 33125

Jose R. Acosta

750 NW 13 th Avenue, Apt. 407

Treasurer

Miami, Florida 33125

Manuel Otero

750 NW 13 th Avenue, Apt. 407

Secretary

Miami, Florida 33125

ARTICLE VI - INCORPORATOR

Lenine M. Ibanez 750 NW 13 th Avenue, Apt. 407 Miami, Florida 33125

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

Signature /Incorporator

Date Date 1006 JUL 20

Date STATE LORIDA

FROM : LAZARUS

07/19/2006 23:57

FAX NO. :3052201440

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ARTICLE VII: INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the registered agent is:

3056353560

Lenine M. Ibanez

750 NW 13th Avenue, Apt. 407 Miami, Florida 33125

SECRETARY OF STATE TALLAHASSEF, FI GRID,

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