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Florida Department of State
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To:

Division of Corporations
Fax Number : (850)205-0381

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-1000
Fax Number : (850)558-1575

FLORIDA PROFIT/NON PROFIT CORPORATION

MEGGAN TOWNHOME CONDOMINIUM ASSOCIATION, INC. A FLOR

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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BARRY M SICKLES ESQ

NO. 464

P. 2 AGE 03/04

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

ARTICLE I NAME

The name of the corporation shall be:

MEGGAN TOWNHOME CONDOMINIUM ASSOCIATION, INC., A FLORIDA NOT FOR PROFIT CORPORATION

ARTICLE II PRINCIPAL OFFICE

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

10155 NW 23 COURT, CORAL SPRINGS, FLORIDA 33065

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This Not for Profit corporation is organized solely for the purpose of carrying out the responsibilities of the condominium association by statute and declaration.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

THE DIRECTORS OF THE NOT FOR PROFIT CORPORATION ARE ELECTED BY A VOTE OF THE SHAREHOLDERS IN ACCORDANCE WITH FLORIDA LAW.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

PRESIDENT: JAMES CARDIELLO
10155 NW 23 COURT, CORAL SPRINGS, FLORIDA 33065

VICE PRESIDENT: LYNDA G. BELL
1361 SW 26 AVENUE, DEERFIELD BEACH, FLORIDA 33442

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

BARRY M. SICKLES, ESQ.
3300 N. UNIVERSITY DRIVE, SUITE 712
CORAL SPRINGS, FLORIDA 33065

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JAMES CARDIELLO
10155 NW 23 COURT
CORAL SPRINGS, FLORIDA 33065

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.

see attached signature page

Signature/Registered Agent

Date

see attached signature page

Signature/Incorporator

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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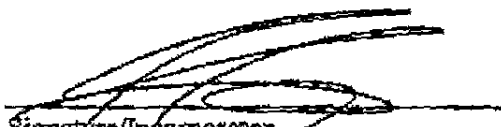
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NO. 464 P. 3 AGE 04/04

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(3)


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TALLAHASSEE, FLORIDA


Signature/Incorporator
JAMES CARDIELLO

11/27/06
Date: NOVEMBER 15, 2006

(An additional article must be added if an effective date is requested.)

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 appointment 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 agent


Signature/Registered Agent
Barry M. Sickles, Esq.

11-15-06
Date: NOVEMBER 15, 2006

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