

197888003849

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

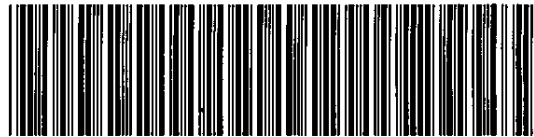
(Business Entity Name)

(Document Number)

Certified Copies 1 Certificates of Status

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Division of Corporations
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Florida Casino Association, 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: EVELIO MEDINA
Name (Printed or typed)

6187 N.W. 167 street Suite H-24
Address

Miami, FL 33015
City, State & Zip

305-609-1220
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:

Florida Casino Association, Inc.

ARTICLE II PRINCIPAL OFFICE

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

6187 N.W. 167 Street, SUITE: H-24
Miami, FL 33015

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To Represent the gaming + casino
interest in the state of Florida

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

As stated in the Bylaws

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Evelio MEDINA, President / Sec / Treas
327 West 75 PLACE
Hialeah, FL 33014

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TALLAHASSEE FLORIDA

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

EVELIO MEDINA
327 West 75 PLACE
Hialeah, FL 33014

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

EVELIO MEDINA
327 West 75 PLACE
Hialeah, FL 33014

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

Date

3-23-07

Signature/Incorporator

Date

3-23-07