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(Requestor's Name)				
· (Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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SECRETARY OF STATE ALLAHASSEE, FLORIDA

CA 1-17

COVER LETTER

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

SUBJECT: Adamsto	wn 1 Condominium Inc.			
	(PROPOSED CORPORATI	E NAME – <u>MUST INCLU</u>	<u>DE SUFFIX)</u>	
Enclosed is an original a	and one(1) copy of the Articl	es of Incorporation and	a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate PPY REQUIRED	
FROM:	Martinique Senior			
Name (Printed or typed)				
	1854 Avenue Q SW Address			
Winter Haven, FL 33880 City, State & Zip			_	
863-294-1824 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)

<u>ARTIC</u>	LE I	N/	ME

The name of the corporation shall be:

Adamstown 1 Condominium, Inc.

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

1854 Avenue Q SW Winter Haven, FL 33880

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Condominium Association to govern and manage condominium homes

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Voted on by unit owners during an annual meeting.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Martinique Senior 1854 Avenue Q SW Winter Haven, FL 33880 - President Eileen Bash 1872 Avenue Q SW Winter Haven, FL 33880 - Treasurer Amanda Vanderhayden 1858 Avenue Q SW Winter Haven, FL 33880 - Secretary



ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Martinique Senior 1854 Avenue Q SW Winter Haven, FL 33880

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Martinique Senior 1854 Avenue Q SWWinter Haven, FL 33880

	rvice of process for the above stated corporation at the place designated appointment as registered agent and agree to act in this capacity.
Mt	12/29/07
Signature/Registered Agent	Date
	12/29/07
Signature/Incorporator	Date
$\langle \rangle$	