

N/2000005/08

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

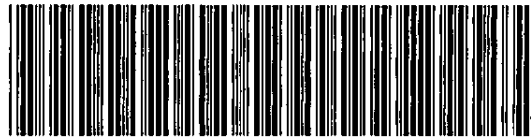
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700235341947

700235341947
05/21/12--01052--023 **70.00

FILED
12 MAY 21 PM 2:56
CLERK OF STATE
TALLAHASSEE, FLORIDA

K 05/22/12

COVER LETTER

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

SUBJECT: 3771-3773 SW 27 LANE CONDOMINIUM 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: Maria Pia Clemens
Name (Printed or typed)

3293 Gifford Lane
Address

Coconut Grove, FL 33133
City, State & Zip

305-443-9857
3771 SW 27 Lane Telephone number

clemten@hotmail.com
E-mail address: (to be used for future annual report notification)

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 3771-3773 SW 27 LANE CONDOMINIUM ASSOCIATION, INC
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
3771 SW 27 LANE
MIAMI, FL 33134

Mailing address, if different is:
3293 Gifford Lane
Coconut Grove, FL 33133

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
NEW CONDOMINIUM

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

AS PROVIDED FOR IN THE BYLAWS

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Maria Pia Clemens - President
Address: 3293 Gifford Lane
Coconut Grove, FL 33133

Name and Title: _____
Address: _____

Name and Title: Rafael Gutierrez - Vice President
Address: 2800 Shipping
Coconut Grove, FL 33133

Name and Title: _____
Address: _____

Name and Title: Mary Forsberg - Treasurer
Address: 3561 East Glencoe Street
Coconut Grove, FL 33133

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Maria Pia Clemens
Address: 3293 Gifford Lane
Coconut Grove, FL 33133

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Maria Pia Clemens
Address: 3293 Gifford Lane
Coconut Grove, FL 33133

FILED
12 MAY 21 PM 2:56
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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

Maria Pia Clemens
Required Signature of Registered Agent

May 17, 2012
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Maria Pia Clemens
Required Signature of Incorporator

May 17, 2012
Date