

N120000007403

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

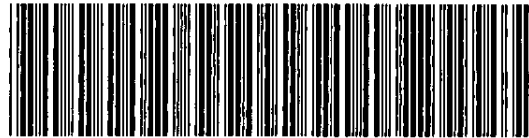
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12 JUL 30 PM 2:34

STOCK MARKET
CIVILIAN REGISTRATION

7/31

8/1

COVER LETTER

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

SUBJECT: LA SAMANNA 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: GRACIELA MCDONALD
Name (Printed or typed)

150 SE 25 RD APT 8-M
Address

MIAMI, FL. 33129
City, State & Zip

786-346-8228
1134 NW 1st St. Telephone number

gmcdonaldproperties@yahoo.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

The name of the corporation shall be:

LA SAMANNA CONDOMINIUM ASSOCIATION, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

1134 NW 5 ST
MIAMI, FL 33128

Mailing address, if different is:

150 SE 25 RD # 8M
MIAMI, FL 33129

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TAKE CONTROL OF THE BUILDING, EXPENSES AND CARE BY THE UNIT'S OWNERS.

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

THE DIRECTORS ARE ELECTED AND APPOINTED BY VOTE.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: STEVEN USMA/PRESIDENT
Address: 43 MONTILLA AVE
CORAL GABLES, FL 33134

Name and Title: CARMEN USMA/TREASURER
Address: 43 MONTILLA AVE
CORAL GABLES, FL 33134

Name and Title: MARIBEL GARCIA/VICEPRESIDENT
Address: 482 NW 26 AVE
MIAMI, FL 33125

Name and Title: ARTURO CABARCOS EXECUTIVE OFFICER
Address: 808 BRICKELL KEY DR # 1903
MIAMI, FL 33131

Name and Title: JOHANNA USMA/FINANCIAL OFFICER
Address: 43 MONTILLA AVE
CORAL GABLES, FL
33134

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

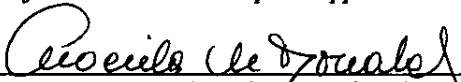
Name: GRACIELA MCDONALD
Address: 150 SE 25 RD APT 8M
MIAMI, FL 33129

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: GRACIELA MCDONALD
Address: 150 SE 25 RD # 8M
MIAMI, FL 33129

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

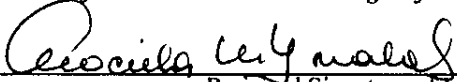


Required Signature of Registered Agent

7-25-12

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.



Required Signature of Incorporator

7-25-12

Date

12 JUL 30 PM 2:34
OFFICE OF THE
CLERK OF THE
DEPARTMENT OF
STATE
MIAMI, FL 33129