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Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				
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COVER LETTER

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

SUBJECT: Haifa Condon	 L(M) NUST INCI TE NAME – <u>MUST INC</u> I	EIN# 59-	1427355		
/(PROPOSED CORPORA)	ΓΕ NAME – <u>MUST INC</u> I	LUDE SUFFIX)			
Enclosed are an original and one (1) copy of the artic	les of incorporation an	d a check for:	•		
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status			
	ADDITIONAL	OF T REQUIRED			
FROM: Haifa Condominion ASS Name (Printed or typed)					
1735 NE 164 57 Address					
N.M.B, FL 33142 City, State & Zip					
305 - 333 - 305 4 Daytime Telephone number					
Rosale. 52088@ Att. net E-mail address: (to be used for future annual report notification)					

NOTE: Please provide the original and one copy of the articles.



RECEIVED 12 SEP 17 PH 4: 14

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

August 16, 2012

HAIFA CONDOMINIUM 1735 NE 164 ST NORTH MIAMI BEACH, FL 33162

SUBJECT: HAIFA CONDOMINIUM Ref. Number: W12000042920

We have received your document for HAIFA CONDOMINIUM and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the full name of the city of the address listed throughout your application.

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

We are enclosing the proper form(s) with instructions for your convenience.

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 612A00021175

09/11/2012 All Corrections Done.



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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 21, 2012

HAIFA CONDOMINIUM INC. 1735 NE 164 ST NORTH MIAMI BEACH, FL 33162

SUBJECT: HAIFA CONDOMINIUM INC.

Ref. Number: W12000042920

We have received your document for HAIFA CONDOMINIUM INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the non profit corporation is being organized.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 612A00021175

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

The name of the co	rporation shall be: MATTA CONDUITINION INC.	
ARTICLE II	PRINCIPAL OFFICE Principal street address	Mailing address, if different is:
	1735 NE 16 V STOOK	1735 NE 164 STREET
	ATTENTION; OFFICE	ATTENTION: OFFICE
	North Miami Beach, FL 33162	MORTH Miami Beach, FL 33/62
ARTICLE III	PURPOSE	
The purpose for w	hich the corporation is organized is:	
Con	NDOMINIUM FISSOCIATIO	~
ARTICLE IV	MANNER OF ELECTION The manner in which the dire	ectors are elected and appointed:
	As stated in the By-Laws	(SECRETARY)
ARTICLE V	tle: P: DACID RAMIZEZ Name and	Title: 5: Wendy A. C.e 550
Address:	1735 NEI GV SEREL Address:	1735 NETBY Street
) 3 = 0. T = 0.7	- APT 106	AOT 307
(ASIDEA)	North Miami Beach, FL 33162	NOTH MIAMI BEACH, FL 33162
Name and Ti	tle: VP: Juan Carlos Rosales Name and	Title: B: Gina Requera (DIRECT
RESIDENT	1735 NE 164 Street Address:	1735 NE 1645+Ret
MESTOENT	Apt 205	NOTU MIAM BEACH, FL. 33/102
	North Miami BEACH, FL 33162	
	tle: T: Juan Carlos Rosales Name and	
Address:	1735 NE 164 STreet Address:	21204 Harbor Way
FASURER	North Miami Beach, PL 33162	North Miami Beach, A 33/80
ARTICLE VI	REGISTERED AGENT	mak PP NO See a
The name and Flo	rida street address (P.O. Box NOT acceptable) of the registere	d agent is:
Name:	- INGK	RID KAMIREZ -
Address:	1736 NE 164 STRACT	A
	NOTH MIAMI BEACH PL 33162	PRESIDENT
A DOTOL D YOU	·	manifus "var" A
The name and add	INCORPORATOR	?
Name:	MAIFA CONDOMINION	SOCIATION TACE
Address:	Tress of the Incorporator is: CONDAMINIUM P	, , , , , , , , , , , , , , , , , , ,
	NORTH MIAMI BEACH	,FL 3316Q
Having been name	ed as registered agent to accept service of process for the al	ove stated corporation at the place designated in this
certificate, I am fai	miliar with and accept the appointment as registered agent and	agree to act in this capacity
	-//	9/11/12
10000	Paguired Signature of Pagistered Agent	Date
	Agguired Signature of Registered Agent	Date
	ment and affirm that the facts stated herein are true. I am awo of State constitutes a third degree felony as provided for in s.81	
		9/11/2012
P	Required Signature of Incorporator	ominium Association, Inc.
I RE		M.E. 164 St. Office
		ilami Boach, FL 33162