

Florida Department of State
Division of Corporations
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Fax Number : (850) 617-6381

From: Account Name : FILINGS, INC.
Account Number : 072720000101
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Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
THE PINES OF VERO CONDO ASSOC, INC.**

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

13 FEB 27 AM 9:54

ARTICLE I NAME

The name of the corporation shall be: THE PINES OF VERO CONDO ASSOC, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
4141 16th Street

Vero Beach, FL 32960

Mailing address, if different is:
8870 W. Oakland Park Blvd, #101

Sunrise, FL 33351

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to administer the operation, maintenance and management
of THE PINES OF VERO CONDO ASSOC, INC.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Directors shall be
elected by the members in accordance with the By-Laws at the regular annual meeting of the membership of the Association

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Frances Solomon as Receiver for Name and Title: _____
for Shadowbrook at Vero, LLC - President

Address: 8870 W. Oakland Park Blvd #101 Address: _____
Sunrise, FL 33351

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
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Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
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ARTICLE VI. REGISTERED AGENT

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

Name: Frances Solomon
Address: 8870 W. Oakland Park Blvd #101
Sunrise, FL 33351

ARTICLE VII. INCORPORATOR

The name and address of the incorporator is:

Name: Frances Solomon as Receiver of Shadowbrook at Vera, LLC
Address: 8870 W. Oakland Park Blvd #101
Sunrise, FL 33351

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

Frances Solomon
Required Signature of Registered Agent

02/01/13

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.817.135, F.S.

Frances Solomon As Receiver
Required Signature of Incorporator

02/01/13

Date

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