

N13000010083

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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

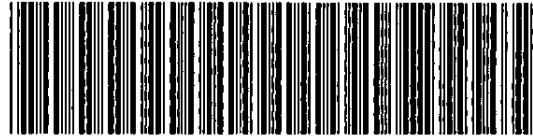
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~~W/3-58689~~

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SECRETARY OF STATE  
DIVISION OF CORPORATION  
2013 NOV -6 PM 3:04

1/4

## COVER LETTER

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

SUBJECT: "Joe Moretti" Resident Council Corp.  
(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: René O. Perez  
Name (Printed or typed)

563 SW 6<sup>th</sup> Street Apto #1  
Address

Miami, Florida, 33130  
City, State & Zip

305 859 9167 (Home) 305 910 3499 (Mobile)  
Daytime Telephone number

E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 22, 2013

RENE' O. PEREZ  
563 SW 6TH STREET APTO #1  
MIAMI, FL 33130

SUBJECT: JOE MORETTI RESIDENT COUNCIL CORP.  
Ref. Number: W13000058689

We have received your document for JOE MORETTI RESIDENT COUNCIL CORP. 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 complete address for the Registered Agent.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of 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.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 313A00024659

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

2013 NOV -6 PM 3:04

**ARTICLE I NAME**

The name of the corporation shall be: "Joe Moretti" Resident Council Corp.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

563 SW 6<sup>th</sup> Street #1  
Miami, Florida 33130

Mailing address, if different is:

404 SW 5<sup>th</sup> Street #2  
Miami, Fla 33130

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To be the guiding head of The  
HUD Resident Association, consisting of persons residing  
in scattered housing developments, but united by one  
management site "Joe Moretti", in order to represent  
residents, create a sense of neighborhood, assist  
the tenants in their rights and duties, that may be  
mutually agreeable in both resident and management

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed: The Council  
or Board are elected by legal tenants for a term of three years.

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

- |   |   |  |
|---|---|--|
| 1 | Name and Title: <u>Rene Perez, President</u>      | Name and Title: <u>Julio Sanchez, Recor. Secret.</u> |
|   | Address: <u>404 SW 5<sup>th</sup> Street #2</u>   | Address: <u>570 SW 5<sup>th</sup> Street #3</u>      |
|   | <u>Miami, Fla 33130</u>                           | <u>Miami Fla 33130</u>                               |
|   | <u>Phone 305 859 9167</u>                         | <u>786 319 0665</u>                                  |
| 2 | Name and Title: <u>Carlos Passo, Vice Pres.</u>   | Name and Title: <u>Maria M. Valdes, Treasurer</u>    |
|   | Address: <u>561 SW 6<sup>th</sup> Street #2</u>   | Address: <u>563 SW 6<sup>th</sup> Street #3</u>      |
|   | <u>Miami Fla. 33130</u>                           | <u>Miami, Fla 33130</u>                              |
|   | <u>Ph. 305 854 0356</u>                           |  |
| 3 | Name and Title: <u>Alberto Toledo, Corr. Sec.</u> | Name and Title: _____                                |
|   | Address: <u>563 SW 6<sup>th</sup> Street #2</u>   | Address: _____                                       |
|   | <u>Miami Florida 33130</u>                        | _____  |
|   | <u>305 856 3624</u>                               | _____  |

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

2013 NOV -6 PM 3:04

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: Alejandra M. Aguilera, Attorney

Address: \_\_\_\_\_

Complete Address

↓  
11218 SW 211th Street  
Suite 302  
Miami, Fla 33189

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Rene O. Perez

Address: 404 SW 57th St #2

Miami Florida 33130

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

[Signature]  
Required Signature of Registered Agent

Oct 4, 2013  
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.

[Signature]  
Required Signature of Incorporator

Oct 4, 2013  
Date

X

DEPARTMENT OF THE TREASURY  
INTERNAL REVENUE SERVICE  
PHILADELPHIA PA 19255-0023

DATE OF THIS NOTICE: 03-20-2003  
NUMBER OF THIS NOTICE: CP 575 E  
EMPLOYER IDENTIFICATION NUMBER: 91-2187175  
FORM: SS-4 NOBOD

FOR ASSISTANCE CALL US AT:  
1-800-829-0115

OR WRITE TO THE ADDRESS  
SHOWN AT THE TOP LEFT.

IF YOU WRITE, ATTACH THE  
STUB OF THIS NOTICE.

JOE MORETTI RESIDENT COUNSEL  
% RICARDO ALFONSO  
563 S W 6TH ST APT 1  
MIAMI FL 33130

**WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER (EIN)**

Thank you for your Form SS-4, Application for Employer Identification Number (EIN). We assigned you EIN 91-2187175. This EIN will identify your business account, tax returns, and documents even if you have no employees. Please keep this notice in your permanent records.

Use your complete name and EIN shown above on all federal tax forms, payments and related correspondence. If you use any variation of your name or EIN, it may cause a delay in processing and may result in incorrect information in your account. It also could cause you to be assigned more than one EIN.

If you want to apply to receive a ruling or a determination letter recognizing your organization as tax exempt, and have not already done so, you should file Form 1023/1024, Application for Recognition of Exemption, with the IRS Ohio Key District Office. Publication 557, Tax Exempt Status for Your Organization, is available at most IRS offices and has details on how you can apply.