

N/13000010262

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

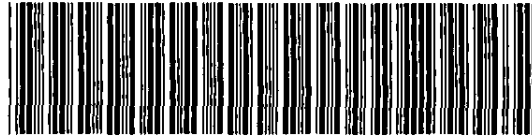
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DEPARTMENT OF STATE
13 NOV 14 PM 2:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
13 NOV 14 PM 2:10

APPROVED
FILED

NOV 14 2013

J. BRYAN

COVER LETTER

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

APPROPRIATE
FILED
13 NOV 14 PM 2:10
STATE
SECRETARY
FLORIDA

SUBJECT: Council On Senior Housing, 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:

M. Dillon Russell

Name (Printed or typed)

4938 S.E. Major Way

Address

Stuart, FL 34997

City, State & Zip

850-668-9000

Daytime Telephone number

dillonrussell@embargo@mail.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:

Council On Senior Housing, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

4938 S.E. Major Way
Stuart, Fl. 34997

Mailing address, if different is:

same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Secure housing for elderly/senior
citizens.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

elected according to the bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

M. Dillon Russell, Pres.

Name and Title:

Address

4938 SE Major Way
Stuart, Fl 34997

Address:

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 NOV 14 PM 2:10

APPROVED
FILED

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: M. Dillon Russell

Address: 4938 SE Major Way
Stuart, FL 34997

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: M. Dillon Russell

Address: 4938 SE Major Way
Stuart, FL 34997

STATE
TALLAHASSEE
FLORIDA

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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

M. Dillon Russell
Required Signature of Registered Agent

Nov 14, 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.

M. Dillon Russell
Required Signature of Incorporator

Nov 14, 2013
Date