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(Requestor's Name)				
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				



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COVER LETTER

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

SUBJECT: Jose MARTI PLAZA RESIDENT COUNCIL, INC.

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

Certificate of Status

□\$78.75

Filing Fee & Certified Copy **LZ** \$87.50

Filing Fee, Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

FROM: JOQUIN ESTRADA
Name (Printed or typed)

154 SW 17 Avenue Apt. 210

Miami FL 33135 1 City, State & Zip

(786) 260 - 4351 Daytime Telephone number

<u>joaquin -2007@live.com</u> E-mail address (to be used for future annual report notification)

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



February 4, 2014

JOAQUIN ESTRADA 154 SW 17 AVENUE, APT.210 MIAMI, FL 33135

SUBJECT: JOSE MARTI PLAZA RESIDENT COUNCIL, INC

Ref. Number: W14000007283

We have received your document for JOSE MARTI PLAZA RESIDENT COUNCIL, 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):

You must list at least one incorporator with a complete business street address.

The registered agent must have a Florida street address. A post office box is not acceptable.

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.

Maryanne Dickey Regulatory Specialist II New Filing Section

Letter Number: 014A00002523

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit) ARTICLE I Plaza Residet Courcil, tax Jose Marti The name of the corporation shall be: ARTICLE II PRINCIPAL OFFICE Principal street address: Mailing address, if different is: 154 SW 17 AW #210 Miami, FL. 33135 ARTICLE III PURPOSE The purpose for which the corporation is organized is: to advocate for the For Residents 8 tose Monti Plaza. MANNER OF ELECTION The manner in which the directors are elected and appointed: Elections every three years. ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Joaquin Estrada, Prosident Gladys Silva, Corespondy Secretary 154 SW 17 Ave # 210 Address: 154 SN 19 Ave. # 208 Address Miami, Florida 33135 MiAmi, FL 33135 Name and Title: Rafael Betancourt, Vice Persillet Rosa Prado, Recording Sesartry 154 SD 17 Ave, # 412 Address: 154 SW 17 ave # 308 Address Miami, Floriga 33135 liami, Florida 33135 Name and Title: MARIA C. Lea L, treasmet Name and Title: 154 SW 17 Aug # 314 Address: Address Miami, FL. 33135

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	Name and Title:	Name and Title:				
•	Address	Address:				
	Name and Title:	Name and Title:				
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	Address	Address:	AMASSEE, EL	, <u>7</u> 0		
	ARTICLE VI REGISTERED AGENT		FLORIE	: 2 6		
	The name and Florida street address (P.O. Box NOT			η, Οι		
	Name: Joaquin Estra Address: 1545W 17AV Miami, FL 33	e. Apt. #210				
	ARTICLE VII INCORPORATOR The name and address of the Incorporator is:					
	Name: Toaquin Estrada					
	Address: 1545M/17/ Migmi, FL	Ave. Apt. #210 33135				
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in a certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity						
	Blank. 01/09/14					
	Required Signature of Regist	ered Agent	Date			
I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a doc to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.						
	BD	<u> </u>	61/09/1	14		
	Required Signature of I	ncorporator	Date			