11000001109

| (Requestor's Name) | |
|-----------------------------------------|-------------|
| (Address) | — |
| (Address) | |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of Status | |
| Special Instructions to Filing Officer: | |
| | |
| | |
| | |
| | |

Office Use Only



700268540117

01/27/15--01045--011 **87.50

15 JAN 27 AM 10: 47
SEPRETARY OF STATE

COVER LETTER

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

SUBJECT: MATILDA 3150-3152 CONDOMINIUM ASSOCIATION, 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

\$87.50

Filing Fee & Certified Copy

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

GEORGE KATSOUFIS

Name (Printed or typed)

3150 MATILDA ST.

Address

MIAMI, FL 33133

City, State & Zip

305-498-9773

Daytime Telephone number

GKATSOUFIS@GMAIL.COM

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

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

George Katsoufis 3150 Matilda St. Miami, FL 33133 January 22nd, 2015

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

SUBJECT: MATILDA 3150-3152 CONDOMINIUM ASSOCIATION, INC.

To Whom It May Concern:

This letter is will serve as notice releasing the name of MATILDA 3150-3152 CONDOMINIUM ASSOCIATION, INC. for use. This name was erroneously associated with a for-profit corporation. This corporation has now dissolved, included in this letter is proof of dissolution.

As the members of the association wish to retain the name, we are are re-submitting articles of incorporation as a non-profit entity. Those papers are also included with this letter.

Thank you for your prompt attention to this matter.

Sincerely,

George Katsoufis

SEGRE TARY OF STATE
TALLAHASSEE FLORIDA

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

| | II PRINCIPAL OFFICE | | |
|--------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-------------------------------------------|
| 31 | Principal <u>street</u> address: 50 MATILDA ST. | | Mailing address, if different is: |
| M | IAMI, FL 33133 | | |
| | for which the corporation is organized is: | | ation consisting of only two (2 |
| | ated at 3150 & 3152 Ma | | |
| | | | |
| | | | |
| | | | |
| -1 | | | |
| | | | |
| <u>ARTICLE I</u> As stated | I in the by-laws of association. | | e directors are elected and appointed: |
| | · ···································· | | |
| | | | |
| ARTICLE | V INITIAL OFFICERS AND/O | R DIRECTORS | |
| | | _ | . Olivia Juan |
| Name and Ti | v INITIAL OFFICERS AND/OI tle: George Katsoufis Director | Name and Title | Olivia Juan Director |
| ARTICLE Name and Ti | tle: George Katsoufis | _ | |
| Name and Ti | tle: George Katsoufis Director | Name and Title | Director |
| Name and Ti | Director 3150 Matilda St. Miami, FL 33133 | Name and Titk Address: | Director 3150 Matilda St. |
| Name and Ti | Director 3150 Matilda St. Miami, FL 33133 | Name and Titk Address: | Director 3150 Matilda St. Miami, FL 33133 |
| Name and Ti Address Name and Ti | Director 3150 Matilda St. Miami, FL 33133 tle: Efrosine Katsoufis | Name and Title Address: Name and Title | Director 3150 Matilda St. Miami, FL 33133 |
| Name and Ti Address Name and Ti | Director 3150 Matilda St. Miami, FL 33133 tle: Efrosine Katsoufis Director | Name and Title Address: Name and Title | Director 3150 Matilda St. Miami, FL 33133 |
| Name and Ti Address Name and Ti | Director 3150 Matilda St. Miami, FL 33133 tle: Efrosine Katsoufis Director 3150 Matilda St. Miami, FL 33133 | Name and Title Address: Name and Title Address: Address: | Director 3150 Matilda St. Miami, FL 33133 |
| Name and Ti Address Name and Ti | Director 3150 Matilda St. Miami, FL 33133 Efrosine Katsoufis Director 3150 Matilda St. Miami, FL 33133 Miguel Juan | Name and Title Address: Name and Title Address: Address: | Director 3150 Matilda St. Miami, FL 33133 |
| Name and Ti Address Name and Ti Address | Director 3150 Matilda St. Miami, FL 33133 tle: Efrosine Katsoufis Director 3150 Matilda St. Miami, FL 33133 Director 3150 Matilda St. Miami, FL 33133 tle: Miguel Juan | Name and Title Address: Name and Title Address: Name and Title Name and Title | Director 3150 Matilda St. Miami, FL 33133 |
| Name and Ti Address Name and Ti Address | Director 3150 Matilda St. Miami, FL 33133 Lile: Efrosine Katsoufis Director 3150 Matilda St. Miami, FL 33133 Lile: Miami, FL 33133 Lile: Miguel Juan Director | Name and Title Address: Name and Title Address: Name and Title Name and Title | Director 3150 Matilda St. Miami, FL 33133 |

| Name and Title:_ | N | lame and Title: |
|-----------------------------------------|------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|
| Address | A | ddress: |
| _ | | |
| | | |
| Name and Title:_ | N | ame and Title: |
| Address | A | ddress: |
| | | |
| _ | | |
| | | |
| ARTICLE VI The name and Flo | REGISTERED AGENT orida street address (P.O. Box NOT acceptal | ble) of the registered agent is: |
| Name: | George Katsoufis | |
| Address: | 3150 Matilda St. | |
| | Miami, FL 33133 | |
| ARTICLE VII | INCORPORATOR | |
| | dress of the Incorporator is: | <u>ਵਾ</u> ਂ. |
| Name: | George Katsoufis | 7. SEE: \$ |
| Address: | 3150 Matilda St. | AHAS |
| | Miami, FL 33133 | HY OF |
| | | process for the above stated corporation at the place resignated. |
| Having been nan certificate, I am fo | ned as registered agent to accept service of a miliar with and accept the appointment as re | process for the above stated corporation at the place designated is egistered agent and agree to act in this capacity |
| | Sk | 22-January-2015 |
| | Required Signature of Registered Ag | gent Date |
| I submit this docu | | are true. I am aware that any false information submitted in a docu |
| to the Department | t of State constitutes a third degree felony as j | orovided for in 3.817.133, r.3. |

. . . .