

N/6000012318

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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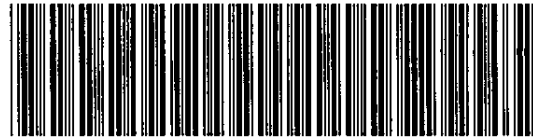
(Business Entity Name)

(Document Number)

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STATE
2016 DEC 29 PM 2:15

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COVER LETTER

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

SUBJECT: Edison Courts Council of Residents, 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: Carol Thomas
Name (Printed or typed)

6407 NW 4th Avenue
Address

Miami, Florida 33150
City, State & Zip

239-878-9883
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.

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

ARTICLE I NAME

The name of the corporation shall be: Edison Courts, Council of Residents, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

6407 NW 4th Avenue

Miami, FL 33150

Mailing address, if different is:

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CLERK

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To advocate for the social, educational and economic opportunities of residents of Edison Courts.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Initial by
popular vote. Elections are held every three (3) years.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Carol Thomas, President

Address: 6407 NW 4th Avenue
Miami, FL 33150

Name and Title: Shantrice Shipman, Recording Secretary

Address: 261 NW 65th Street
Miami, FL 33150

Name and Title: Desiree Goodwin, Vice-Pres.

Address: 6306 NW 3rd Avenue
Miami, FL 33150

Name and Title: Annette French, Corresp. Secretary

Address: 252 NW 65th Street
Miami, FL 33150

Name and Title: Linda Felder, Treasurer

Address: 251 NW 64th Street
Miami, FL 33150

Name and Title: _____

Address: _____

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: CAROL THOMAS

Address: 6407 N.W. 4th AVE
MIAMI, FL 33150

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: CAROL THOMAS

Address: 6407 N.W. 4th AVE
MIAMI, FL 33150

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Carol Thomas
Required Signature of Registered Agent

11-21-15
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.

Carol Thomas
Required Signature of Incorporator

11-21-16
Date

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