

N17000012650

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

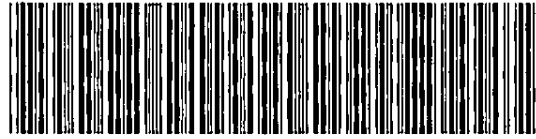
(Business Entity Name)

(Document Number)

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DEC 22 2017

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COVER LETTER

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

SUBJECT: RESA Miami Chapter, 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: Cecilia Aimee Lopez
Name (Printed or typed)

11364 NW 52nd Lane
Address

Doral, FL 33178
City, State & Zip

786-458-2018
Daytime Telephone number

aimeelopezc@gmail.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: RESA Miami Chapter, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

11364 NW 52nd Lane

Doral, FL 33178

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Our chapter's purposes are to provide educational & networking opportunities to the local real estate community & our members, and to provide educational information to consumers through meetings, trade events & seminars.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

As provided for in the Bylaws.

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STATE OF FLORIDA

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Cecilia Aimee Lopez, President

Address: 11364 NW 52nd Lane
Doral, FL 33178

Name and Title: Ana Ortiz, President Elect

Address: 7401 Wiles Rd, Suite 209
Coral Springs, FL 33067

Name and Title: Monica Noguero, Treasurer

Address: 1 North Ocean Blvd, Suite 1004
Pompano Beach, FL 33062

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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: Cecilia Aimee Lopez
Address: 11364 NW 52nd Lane
Doral, FL 33178

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ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Cecilia Aimee Lopez
Address: 11364 NW 52nd Lane
Doral, FL 33178

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

Cecilia Lopez

Required Signature of Registered Agent

Dec 18/17

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.

Cecilia Lopez

Required Signature of Incorporator

Dec 18/17

Date