

**N18000009950**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

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\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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N CULLIGAN

SEP 18 2018

## COVER LETTER

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

SUBJECT: Coconut Grove Foundation 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: Seth SKLARCY  
Name (Printed or typed)

3191 GRAND AVE # 2172  
Address

COCONUT GROVE, FL 33133  
City, State & Zip

305 525-6982  
Daytime Telephone number

Seth@citydebate.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: COCONUT GROVE FOUNDATION INC

ARTICLE II PRINCIPAL OFFICE

Principal street address:

3191 GRAND AVE #2172

COCONUT GROVE, FL 33133

Mailing address, if different is:

Box 332172

COCONUT GROVE, FL 33233-2172

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To help people in need to

obtain housing, food, medical and dental care and legal assist.

and/or provide transportation and any other legal function.

This shall be a 501(c)(3) charitable foundation.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Director

shall be appointed by the person who forms the corporation until  
December 2020. Thereafter shall be elected by the majority of the stockholders.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SETH SKLADNY, President SECRETARY

Address: 3191 GRAND AVE #2172

COCONUT GROVE, FL 33133

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

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2018 SEP 18 10:04

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: Seth Sklarey

Address: 3191 GRAND AVE #2172  
COCONUT GROVE, FL 33133

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Seth Sklarey

Address: 3191 GRAND AVE #2172  
COCONUT GROVE, FL 33133

**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

\_\_\_\_\_  
Required Signature of Registered 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 document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

\_\_\_\_\_  
Required Signature of Incorporator

\_\_\_\_\_  
Date

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2018 SEP 18 11:10:04  
TALLAHASSEE

SEPT 18, 2018

Sept 18, 2018