

N2000000 5444

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

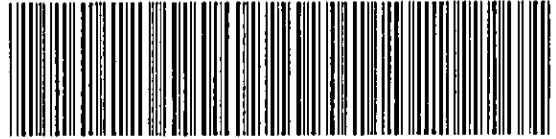
(Document Number)

Certified Copies _____ Certificates of Status _____

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2020

134

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 05/19/2020

****WALK IN****

ENTITY NAME GOLD COAST CHAPTER OF ASHRAE INC.

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certificate of Good Standing

****APOSTILLE' / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$70.00

ACCOUNT #: I20160000072

S. R. Webb

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

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

SUBJECT: Gold Coast Chapter of ASHRAE, 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: Heather Bell
Name (Printed or typed)

8930 State Road 84
Address

Fort Lauderdale, FL 33324
City, State & Zip

954-467-1402
Daytime Telephone number

hbell@fellerpe.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: Gold Coast Chapter of ASHRAE, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
8930 State Road 84

Fort Lauderdale, FL 33324

Mailing address, if different is:
8930 State Road 84

Fort Lauderdale, FL 33324

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

To advance the Arts and Sciences of heating,

ventilation, air conditioning and refrigeration to serve humanity and promote a sustainable world.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: VOTED

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Fausto Frias, President

Address: 8930 State Road 84
Fort Lauderdale, FL 33324

Name and Title: Tim Seifert, President Elect

Address: 8930 State Road 84
Fort Lauderdale, FL 33324

Name and Title: Heather Bell, Treasurer

Address: 8930 State Road 84
Fort Lauderdale, FL 33324

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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TALLAHASSEE, FLORIDA

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: URS AGENTS, LLC
Address: 3458 Lakeshore Drive
Tallahassee, FL 32312

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Tim Seifert
Address: 8930 State Road 84
Fort Lauderdale, FL 33324

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

Kathy Clark Kathy Clark, Asst. Secretary
Required Signature of Registered Agent

5/19/2020
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.

[Signature]
Required Signature of Incorporator

5/18/20
Date