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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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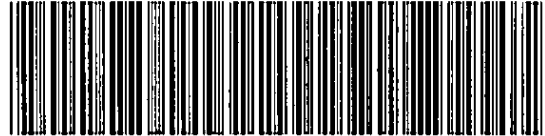
(Business Entity Name)

(Document Number)

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2020 SEP 17 PM 4:54  
SECRETARY OF STATE  
TALLAHASSEE, FL

N. C. 11/10  
SEP 17 2020

## COVER LETTER

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

**SUBJECT:** Culmer Place & Culmer Gardens Resident Council, 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:** Mercedes Pedroso  
\_\_\_\_\_  
Name (Printed or typed)

491 N.W. 5 Street  
\_\_\_\_\_  
Address

Miami, Florida 33128.  
\_\_\_\_\_  
City, State & Zip

(786) 287-1055  
\_\_\_\_\_  
Daytime Telephone number

pedrosomercedes@yahoo.es  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 31, 2020

MERCEDES PEDROSO  
491 N.W. 5 STREET  
MIAMI, FL 33128

SUBJECT: CULMER PLACE & CULMER GARDENS RESIDENT COUNCIL,  
INC.  
Ref. Number: W20000098245

We have received your document for CULMER PLACE & CULMER GARDENS  
RESIDENT COUNCIL, INC. and your check(s) totaling \$122.50. However, the  
enclosed document has not been filed and is being returned for the following  
correction(s):

List the title for Mercedes Pedroso

Please return your document, along with a copy of this letter, within 60 days or  
your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call  
(850) 245-6052.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 020A00016696

2020 SEP 17 PM 3:59

SEP 17 2020

RECEIVED  
DIVISION OF  
CORPORATIONS

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

**FILED**

2020 SEP 17 PM 4: 54

SECRETARY OF STATE  
TALLAHASSEE, FL

**ARTICLE I NAME**

The name of the corporation shall be: Culmer Place & Culmer Gardens Resident Council, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

491 N.W. 5 Street.

Miami, Florida 33128

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To advocate for the educational and social opportunities of residents of Culmer Place and Culmer Gardens.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: Per Bylaws Elections

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:	<u>Mercedes Pedroso (President)</u>	Name and Title:	<u>Dulce Maria Pujol (Vice-President)</u>
Address	<u>491 N.W. 5 Street.</u>	Address:	<u>501 N.W. 5 Street</u>
	<u>Miami, FL 33128</u>		<u>Miami, Florida 33128</u>
	<u>Tel: (305) 287-1055.</u>		<u>Tel: (305) 399-7792</u>
Name and Title:	<u>Vera Brownlee (Treasurer)</u>	Name and Title:	<u>Maria Fernandez (Recording Secretary)</u>
Address	<u>804 N.W. 5 Ave.</u>	Address:	<u>406 N.W. 6 Street.</u>
	<u>Miami, Florida 3336</u>		<u>Miami, Florida 33136</u>
	<u>(786) 740-0829</u>		<u>(786) 523-6214</u>
Name and Title:	<u></u>	Name and Title:	<u>Stephanie Martin (Corr. Secretary)</u>
Address	<u></u>	Address:	<u>561 N.W. 8 Street.</u>
	<u></u>		<u>Miami, Florida 33136.</u>
	<u></u>		<u></u>

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: Mercedes Pedroso.

Address: 491 N.W. 5 Street.

Miami, Florida 33128.

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Mercedes Pedroso.

Address: 491 N.W. 5 Street.

Miami, Florida 33128.

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: June 30, 2020. (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

2020 SEP 17 PM 4:54  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED