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HAYES STREET CIVIC ASSOCIATION,

INC.

☒ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
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Signature _____

Requested by: BA

05/24/21

Name _____

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COVER LETTER

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

SUBJECT: HAYES STREET CIVIC ASSOCIATION, 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: JAMES W. CARPENTER

Name (Printed or typed)

515 E. LAS OLAS BLVD. SUITE 850

Address

FORT LAUDERDALE, FLORIDA 33301

City, State & Zip

954-766-9930

Daytime Telephone number

jwc@angelolaw.com

E-mail address: (to be used for future annual report notification)

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

ED

ARTICLES OF INCORPORATION

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

2021 MAY 24 AM 10:01

ARTICLE I NAME

The name of the corporation shall be: HAYES STREET CIVIC ASSOCIATION, INC.

SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE II PRINCIPAL OFFICE

Principal street address:
1212 S.E. 3RD AVENUE

Mailing address, if different is:

FORT LAUDERDALE, FLORIDA 33316

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

SOLELY TO PROMOTE MEETING AND CONFERRING WITH THE CITY OF HOLLYWOOD

REGARDING ZONING CHANGES TO THE AREA COVERED BY THE ASSOCIATION

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SCOTT SCHLESINGER, DIRECTOR Name and Title: SCOTT SCHLESINGER, PRES.

Address: 1212 S.E. 3RD AVENUE Address: 1212 S.E. 3RD AVENUE
FORT LAUDERDALE, FLORIDA 33316 FORT LAUDERDALE, FLORIDA 333

Name and Title: MICHAEL COHEN, DIRECTOR Name and Title: DANIEL ELLIOTT, DIRECTOR

Address: 157 FIESTA WAY Address: 2310 HAYES STREET
FT. LAUDERDALE FL 33301 HOLLYWOOD FL 33020

Name and Title: _____ Name and Title: _____

Address: _____ 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: ANGELO & BANTA, P.A.

Address: 515 E. LAS OLAS BLVD. STE. 850

FORT LAUDERDALE, FLORIDA 33301

ARTICLE VII INCORPORATOR

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

Name: JAMES W. CARPENTER

Address: 515 E. LAS OLAS BLVD. STE. 850

FORT LAUDERDALE, FLORIDA 33301

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

5/17/21

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

5/17/21

Date

SECRET
TALLAHASSEE, FL

2021 MAY 24 AM 10:01

ED