

N21000012876

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ALLAMASSSETT

SECRETARY OF STATE

**CORPORATE
ACCESS,
INC.**

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236 East 6th Avenue, Tallahassee, Florida 32303
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WALK IN

PICK UP: 11/5 DANNY

CERTIFIED COPY _____

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1. TOWNHOMESW OF DANIA GARDENS ASSOCIATION, INC

(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 5, 2021

CORPORATE ACCESS

SUBJECT: TOWNHOMES OF DANIA GARDENS ASSOCIATION, INC.
Ref. Number: W21000144624

*Please give
original submission
Date
Corrected*

We have received your document for TOWNHOMES OF DANIA GARDENS ASSOCIATION, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

Article IV the manner of election is not complete.

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 III

Letter Number: 621A00027049

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

2021 NOV -5 PM 1:06

ARTICLE I NAME

The name of the corporation shall be: TOWNHOMES OF DANIA GARDENS ASSOCIATION, INC.

SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE II PRINCIPAL OFFICE

Principal street address:
3309 ISLEWOOD AVENUE

WESTON, FL 33332

Mailing address, if different is:
3309 ISLEWOOD AVENUE

WESTON, FL 33332

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

OPERATION AND MAINTENANCE AS PER THE HOA DECLARATION

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: AS PROVIDED FOR
IN THE BY-LAWS

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>BARI DRORE, President</u>	Name and Title:	_____
Address	<u>3309 ISLEWOOD AVENUE</u>	Address:	_____
	<u>WESTON, FL 33332</u>		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____

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: BARI DRORE
 Address: 3309 ISLEWOOD AVENUE
WESTON, FL 33332

ARTICLE VII INCORPORATOR

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

Name: BARI DRORE
 Address: 3309 ISLEWOOD AVENUE
WESTON, FL 33332

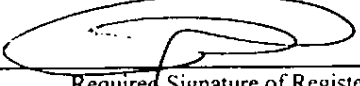
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 11/2/2021 (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

11/2/2021

 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

11/2/2021

 Date

FILED
 2021 NOV -5 PM 1:07
 DEPT. OF STATE
 TALLAHASSEE, FL