

9/16/22, 9:36 AM

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To:

Division of Corporations
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From:

Account Name : BILZIN SUMBERG BAENA PRICE & AXELROD LLP
Account Number : 075350000132
Phone : (305)374-7580
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: afinley@bilzin.com**FLORIDA PROFIT/NON PROFIT CORPORATION**
Miami-Dade Police Guardian Foundation, Inc.

Certificate of Status	0
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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: Miami-Dade Police Guardian Foundation, Inc.

ARTICLE II PRINCIPAL OFFICEPrincipal **street** address:

3480 Main Highway, Suite 400

Miami, Florida 33133

Mailing address, if different is:

(same)

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: exclusively for charitable purposes within the meaning of section 501(c)(3) of the Internal Revenue Code of 1986, as amended, and not for pecuniary profit.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: shall be as set forth in the bylaws of the Corporation.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Nicholas Hammerschlag, Director

Name and Title:

Address

3480 Main Highway, Suite 400

Address:

Miami, Florida 33133

Name and Title: Frank Quesada, Director

Name and Title:

Address

1313 Ponce de Leon Boulevard

Address:

Suite 200

Coral Gables, Florida 33134

Name and Title: Sankesh Abbhi, Director

Name and Title:

Address

3121 Ponce de Leon Boulevard

Address:

Coral Gables, Florida 33134

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Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

_____ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Nicholas Hammerschlag _____

Address: 3480 Main Highway, Suite 400 _____

Miami, Florida 33133 _____

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Nicholas Hammerschlag _____

Address: 3480 Main Highway, Suite 400 _____

Miami, Florida 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*_____
Requi _____ gistered Agent

9/15/2022 | 11:36:10 AM PDT

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.*_____
R _____ of Incorporator

9/15/2022 | 11:36:10 AM PDT

Date

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