

124 000006 2595

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

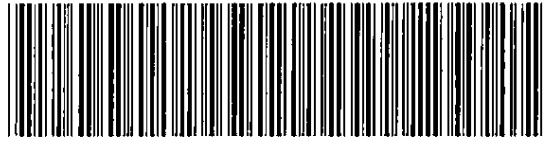
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800421745188

01/17/24--11025--006 **103.7

FILED

2024 JAN 17 AM 8:52

CLERK OF STATE
TALLAHASSEE, FL

124-2595

CH

2/22/24

FL DEPT OF STATE
DIVISION OF CORPORATIONS

JANUARY 5, 2024

RE: RELEASING CORPORATE NAME **FROM** FOR-PROFIT STATUS **TO** NOT-FOR-PROFIT STATUS

AFFIDAVIT

I, FRANCO SCALA, being duly sworn, depose and state as follows:

1. I am the MANAGER of THE GROVE HOMEOWNER'S ASSOCIATION OF OAKLAND, INC., a corporation organized and existing under the laws of the state of FLORIDA, with its principal place of business at 1010 VINELAND RD., WINTER GARDEN, FL 34787.

2. The purpose of this affidavit is to declare my intention and consent to release the corporate name " THE GROVE HOMEOWNER'S ASSOCIATION OF OAKLAND, INC." to THE GROVE HOMEOWNER'S ASSOCIATION OF OAKLAND, INC., a not-for-profit corporation company organized and existing under the laws of the state of FLORIDA, with its principal place of business at 1010 VINELAND RD., WINTER GARDEN, FL 34787.

3. I acknowledge that the release of the corporate name THE GROVE HOMEOWNER'S ASSOCIATION OF OAKLAND, INC." is voluntary on my part and is made without any coercion or duress.

4. I understand that the release of the corporate name THE GROVE HOMEOWNER'S ASSOCIATION OF OAKLAND, INC. to the Not-for-Profit corporation THE GROVE HOMEOWNER'S ASSOCIATION OF OAKLAND, INC., is for the purpose of allowing the not-for-profit entity to utilize the name for its lawful and non-commercial activities.

5. I affirm that I am the authorized representative of THE GROVE HOMEOWNER'S ASSOCIATION OF OAKLAND, INC. with the legal capacity to release the corporate name, and that no other person or entity has any rights or claims to the name.

6. I understand that once this affidavit is notarized, it will be considered a legally binding document, and I will not have any further claim to the corporate name " THE GROVE HOMEOWNER'S ASSOCIATION OF OAKLAND, INC." a for-profit organization.

7. I hereby authorize and request the appropriate state authorities to process the necessary paperwork to effectuate the release of the corporate name " THE GROVE HOMEOWNER'S ASSOCIATION OF OAKLAND, INC." to the Not-for-Profit corporate name, THE GROVE HOMEOWNER'S ASSOCIATION OF OAKLAND, INC.

8. I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge, information, and belief.

FILED
2024 JAN 17 AM 8:52
CLERK OF DISTRICT COURT
JANUARY 17, 2024
STATE OF FLORIDA

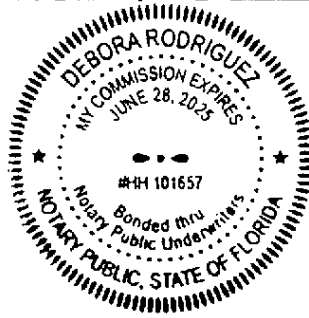
FRANCO SCALA

Date

Sworn to and subscribed before me this 5th day of January, 2024 by
Franco Scala.

Debora Rodriguez
Notary Public
[Notary Seal]

My Commission Expires: _____



FILED
2024 JAN 17 AM 8:52
TALLAHASSEE, FL

COVER LETTER

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

SUBJECT: THE GROVE HOMEOWNER'S ASSOCIATION OF OAKLAND, 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

FILED
2024 JAN 17 AM 8:52
TALLAHASSEE, FL

FROM: DEBORA RODRIGUEZ

Name (Printed or typed)

1010 VINELAND RD

Address

WINTER GARDEN, FL 34787

City, State & Zip

407-593-5148

Daytime Telephone number

DEBBIE@PIONEERBUILDERSFL.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: THE GROVE HOMEOWNER'S ASSOCIATION OF OAKLAND, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
1010 VINELAND RD

WINTER GARDEN, FL 34787

Mailing address, if different is:
1010 VINELAND RD

WINTER GARDEN, FL 34787

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ENFORCE AND FULFILL THE OBJECTIVES AND PURPOSES STATED
IN THE DECLARATION OF COVENANTS, CONDITIONS, EASEMENTS, AND RESTRICTIONS FOR THE GROVE
HOMEOWNER'S ASSOCIATION OF OAKLAND AS RECORDED IN THE PUBLIC RECORDS OF ORANGE COUNTY.

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: FRANCO SCALA, P

Address: 1010 VINELAND RD
WINTER GARDEN, FL 34787

Name and Title: JAMES HEISTAND, VP S

Address: 1010 VINELAND RD
WINTER GARDEN, FL 34787

Name and Title: DEBORA RODRIGUEZ, T

Address: 1010 VINELAND RD
WINTER GARDEN, FL 34787

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

CLERK OF STATE
TALLAHASSEE, FL

2024 JAN 17 AM 8:52

FILED

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: THE LAW OFFICES OF MICHEL SCALA, P

Address: 1010 VINELAND RD.

WINTER GARDEN, FL 34787

FILED
2024 JAN 17 AM 8:52
STATE OF FLORIDA
TALLAHASSEE, FL

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DEBORA RODRIGUEZ

Address: 1010 VINELAND RD

WINTER GARDEN, FL 34787

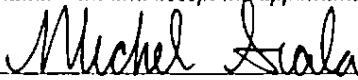
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 11/15/2023. (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

11/15/2023

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

11/15/2023

Date