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09/19/24--01011--001 **70.00



Daniel A. Jacobson, P.A.

LAW OFFICES

March 14, 2024

Via Federal Express

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

Re:

13 Urban Place Homeowner's Association, Inc.

Document number P17000018997

To whom it may concern:

Enclosed herewith please find:

- 1. Business Purpose Affidavit
- 2. Articles of Incorporation
- 3. Check in the amount of \$70.00 made payable to the Secretary of State

Please note that the referenced, for profit entity had been administratively dissolved. The enclosed Affidavit is from all of the directors and officers of that entity authorizing that the name be released for reuse.

The enclosed Articles of Incorporation are to form a Not for Profit corporation using the same name.

Best regards,

lamel Jacobson

Encl.

BUSINESS PURPOSE AFFIDAVIT

STATE OF FLORIDA

COUNTY OF BROWARD

Before me a Notary Public duly authorized to administer oaths and take acknowledgements in the County and State aforesaid, personally came and appeared Brian T. Head ("Head"), Shama Patel ("Patel), and Melissa Orlick ("Orlick")(hereinafter may collectively be referred to as the "Affiants"), who being by me first duly sworn, depose and state:

- 1. Affiants are all of the directors and officers of 13 Urban Place Homeowner's Association, Inc., a Florida corporation with document Number P17000018997 which was administratively dissolved on September 22, 2023. The Details by Entity Name from the Division of Corporations' web site are attached hereto as Exhibit "A"
- 2. Affiants have no intention of reinstating 13 Urban Place Homeowner's Association, Inc. as a for profit corporation and authorize the name to be released.

Brian J. Herd

Shama Patel

Melissa Orlick

Sworn to and subscribed before me this <u>J</u> day of <u>FUJ</u>, 2024 by Brian T. Head, Shama Patel, and Melissa Orlick who are personally known to me or have produced

as identification.

NOTARY

PUBLIC Name:

State of Florida

My Commission Expires: 08/03

Notery Public State of Flonda
Roy L Ribot
My Commission HH 026958
Expres 08/03/2024

COVER LETTER

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

ECT:	(PROPOSED CORPO	PRATE NAME - MUST INC	LUDE SUFFIX)
ed is an original a	nd one (1) copy of the Art	cles of Incorporation and	a check for :
■ \$70.00	□ \$78.75	\$78.75	□ \$87.50
Filing Fee	Filing Fee & Certificate of	Filing Fee & Certified Copy	Filing Fee, Certified Copy
	Status		& Certificate
		ADDITIONAL CO	PY REQUIRED
FROM:	Daniel A. Jacobson		
r KOWE	Name (Printed or typed)		
	901 S Federal Highway, Suite	201	
		Address	-
		Address	
	Fort Lauderdale, FL 33316	Addices	
		City, State & Zip	-
			-
	954.467.3191		-

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 The name of the	NAME corporation shall be:	CE HOMEOWNER'S ASSOCIATION, INC.
	PRINCIPAL OFFICE	
3725	Principal <u>street</u> address: NE 13th Avenue	Mailing address, if different is:
Oakla	and Park, FL 33334	
	r which the corporation is organized is:	Place community and to provide for the maintenance, preservation and
architectural c	ontrol of the residential lots and commo	n areas and to promote the health, safety and welfare of the residents
within the com	munity	
ARTICLE IV	MANNER OF ELECTION The ma	nner in which the directors are elected and appointed:
IRTICLE V	INITIAL OFFICERS AND/OR DIRE Brian T. Head, president	-
Name and Title	2319 N Andrews Ave	
Address	c/o Royale Management Services	Address:
	Fort Lauderdale, FL 33311	
Jama and Title	Shama Patel, VP and Treasurer	Name and Title:
Addiess	2319 N Andrews Ave	Address:
	c/o Royale Management Services	Audress.
	Fort Lauderdale, FL 33311	
Name and Title	Melissa Orlick	Name and Title:
Address :	2319 N Andrews Ave	Address:
	c/o Royale Management Services	
	Fort Lauderdale, FL 33311	

Name and Title:_		Name and Title	2:	<u>.</u>
Address		_ Address:		
		_		
Name and Title:_		Name and Title	::	
Address		_ Address:		
		_		
		_		·
	REGISTERED AGENT orida street address (P.O. Box NOT acce	entable) of the rev	istered avent is:	
Name:	Daniel A, Jacobson, P.A.	putere, or me reg	merca agoni iii	
Address:	901 S Federal Highway, Suite 201	 -		
	Fort Lauderdale, FL 33316			
	INCORPORATOR dress of the Incorporator is:			
Name:	Brian T. Head			
Address:	2319 N Andrews Ave			
Address.	Fort Lauderdale, FL 33311			
Effective date, if	EFFECTIVE DATE: other than the date of filing:ate is listed, the date must be specific a			or 90 days after the filing.)
	inserted in this block does not meet the a tive date on the Department of State's rea		ry filing requirements, th	is date will not be listed as the
Having been nan certificate, I am fo	ned as registered agent to accept service amiliar with gold accept the appointment	e of process for t as registered ager	he above stated corporal at and agree to act in this	tion at the place designated in this capacity
	Required Signature of Registered	d Agent		Date
	ment and affirm that the facts stated here f State constitutes a third degree felony a			rmation submitted in a document to
	1/- / 1/	1		3-14-24 Date
	Required Signature of Inco	orporator		_
				2024 Ar
				~

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The purpose for		lace community and to provide for the maintenance, preservation and
architectural	control of the residential lots and common	areas and to promote the health, safety and welfare of the residents
within the cor	nmunity	
ARTICLE IV ARTICLE V Name and Titl Address	Brian T. Head, president	nner in which the directors are elected and appointed: by membership
	c/o Royale Management Services	
Name and Titl Address	2319 N Andrews Ave c/o Royale Management Services	Name and Title: Address:
	Fort Lauderdale, FL 33311	
Name and Titl		Name and Title:
Address		Address:
	c/o Royale Management Services	
	Fort Lauderdale, FL 33311	

Name and Title:_	Name and Title:
Address	Address:
-	
Name and Title:_	Name and Title:
Address	Address:
	REGISTERED AGENT prida street address (P.O. Box NOT acceptable) of the registered agent is: Daniel A, Jacobson, P.A.
Name:	<u> </u>
Address:	Fort Lauderdale, FL 33316
	INCORPORATOR dress of the Incorporator is: Brian T. Head 2319 N Andrews Ave Fort Lauderdale, FL 33311
Effective date, if (If an effective d Note: If the date	EFFECTIVE DATE: other than the date of filing:
I submit this docu	Required Signature of Registered Agent move and affirm that the facts stated herein are true. I am aware that any false information xubmitted in a document to
the Department o	State constitutes a third degree felony as provided for in s.817.155, F.S.
	Required Signature of Incorporator 3-14-34 Date

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