

Florida Department of State
Division of Corporations
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(((H24000286347 3)))

8-28-24



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FLORIDA PROFIT/NON PROFIT CORPORATION

Plaza at Normandy Owners' Association, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	02
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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: PLAZA AT NORMANDY OWNERS' ASSOCIATION, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
4211 W Boy Scout Boulevard, Suite 620

Tampa, Florida 33607

Mailing address, if different is:
4211 W Boy Scout Boulevard, Suite 620

Tampa, Florida 33607

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The Association is formed to:

- (a) provide for ownership, operation, maintenance and preservation of certain common areas of the corporation;
(b) perform the duties delegated to it in the Declaration, Bylaws and these Articles (collectively, and as may be amended) and
(c) administer the interests of the corporation and Members.

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ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Directors shall be appointed and/or elected as stated in the Bylaws of the corporation.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Michael T. Wagner, Director</u>	Name and Title:	_____
Address	<u>4211 W Boy Scout Boulevard, Suite 620</u> <u>Tampa, Florida 33607</u>	Address:	_____ _____ _____
Name and Title:	<u>Sarah M. Liakos, Director</u>	Name and Title:	_____
Address	<u>4211 W Boy Scout Boulevard, Suite 620</u> <u>Tampa, Florida 33607</u>	Address:	_____ _____ _____
Name and Title:	<u>Matthew Griffith, Director</u>	Name and Title:	_____
Address	<u>4211 W Boy Scout Boulevard, Suite 620</u> <u>Tampa, Florida 33607</u>	Address:	_____ _____ _____

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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: Jonathan P. Jennwein

Address: 101 E. Kennedy Boulevard, Suite 3700

Tampa, Florida 33602

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jonathan P. Jennwein

Address: 101 E. Kennedy Boulevard, Suite 3700

Tampa, Florida 33602

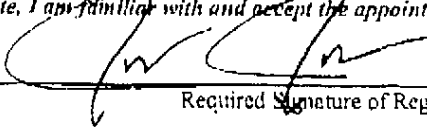
ARTICLE VIII EFFECTIVE DATE:

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.

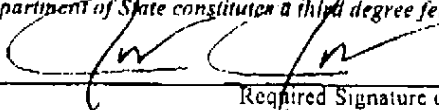
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature of Registered Agent

8/26/2024
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

8/26/2024
Date

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