

FROM : POINTDULOUR

PHONE NO. : 3059446095

Dec. 01 1997 07:15PM P3

P02000070848

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

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-06/10/02--01050--020
****131.25 *****87.50

SUBJECT:

Echoes Apartment Corporation
(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

☒ \$122.50
Filing Fee
& Certified Copy

☒ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM:

Jacklyn Alexis
Name (Printed or typed)

P.O. box 381305
Address

Miami, FL 33238
City, State & Zip

786-201-2485
Daytime Telephone number

FILED
02 JUN 27 AM 10:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.

nc 6/27



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

June 12, 2002

JACKLYN ALEXIS
P.O. BOX 381305
MIAMI, FL 33238

SUBJECT: ECHOES APPARTMENT CORPORATION
Ref. Number: W02000017097

We have received your document for ECHOES APPARTMENT CORPORATION and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address is not acceptable.

PLEASE VERIFY THE SPELLING OF THE NAME.

Please return the original and one copy of 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) 245-6067.

Neysa Culligan
Document Specialist
New Filing Section

Letter Number: 202A00038502

ARTICLES OF INCORPORATION

We, the undersigned, as proper persons acting as incorporators of a corporation under the laws of the State of Florida, adopt the following articles of incorporation:

- FIRST The name of the corporation is: Echoes Apartment Inc.
- SECOND The period of its duration is: Indefinite
- THIRD The purpose of the corporation is: Transact business in Florida for profit
- FOURTH The aggregate number of authorized shares is: 1000
- FIFTH The corporation will not commence business until at least \$ 1000⁰⁰ dollars have been received by it as consideration for the issuance of shares.
- SIXTH Cumulative voting of shares of stock, (~~is~~) or (is not) authorized.
- SEVENTH Provisions limiting or denying to shareholders the preemptive right to acquire additional or treasury shares of the corporation are: None
- EIGHTH Provisions for regulating the internal affairs of the corporation are: The responsibilities of the board
- NINTH The address of the initial registered office of the corporation is: 7028 NW 141 Ave Pembroke Pines, FL 33028 and the name of its initial registered agent at such address is: Jacklyn Alexis
- TENTH The address of the principal place of business is: P.O. box 381305 Miami, FL 33238

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ELEVENTH The number of directors constituting the initial board of directors of the corporation is 2, and the name and address of this person who are to serve as directors until the first annual meeting of share holders or until their successors are elected and shall qualify are:

NAME

ADDRESS

Louis Max Isaac - President 2028 NW 141 Ave - Pembroke Pines, FL 33028
Jacklyn Alexis - Vice President 2028 NW 141 Ave Pembroke Pines, FL 33028

TWELFTH INCORPORATOR - The name and address of the incorporator to this articles of incorporation are:

Jacklyn Alexis

Louis Max Isaac

② Jacklyn Alexis
Signature/ Incorporator

② LOUIS MAX ISAAC
Signature/ Incorporator

Luckner Isaac

Augustin Deliozaire

② Luckner Isaac
Signature/Incorporator

② Augustin Deliozaire
Signature/Incorporator

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

⑧ Jacklyn Aletis
Signature/Registered Agent

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