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(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Eiling Officer	
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Office Use Only



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SECRETARY OF STATE FLORIDA



COVER LETTER

FLORD TAN ARMS, INC., a Horida Not for Profit Corporation.

(PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)

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

Enclosed is an original	l and one (1) copy of the Ar	ticles of Incorporation and	d 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	

FROM:

ANTONIO A. FERNANDEZ

Name (Printed or typed)

1500 SAN REMS AVENUE #790

Address

CORAL GABIES FLOUDA 33/46

City, State & Zip

305 G65-6335

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

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

1/1

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SECRETARY OF STATE

January 3rd, 2011

Division of Corporations Attn: Valerie

VIA FACSIMILE 850-245-6804

Re: Floridian Arms, Inc. a Florida Not For Profit Address: 1450 NE 170th Street #306 North Miami Beach, Florida 33162

Dear Valerie:

As per your instructions, this letter is for purposes of informing your office that we have no intentions of reinstating our old corporation. In fact, it was our accountant who advised us to change from a Profit to a Not For Profit corporation which is exactly what we are doing and thus we will have no intention of ever reinstating said corporation.

ours truly

Secretary



ARTICLE I NAME EFFECTIVE DATE 1/1/201/ The name of the corporation shall be: FLORIDIAN ARMS, INC. PRINCIPAL OFFICE ARTICLE II Principal street address Mailing address, if different is: <u>1450 NE 190 STREET</u> NORTH MIAMI BEACH, FL ARTICLE III **PURPOSE** TO MANAGE AND RUN THE DATILY DECEMBEN OF A CONDOMINIUM ASSOCIATION The purpose for which the corporation is organized is: ARTICLE IV **MANNER OF ELECTION** The manner in which the directors are elected and appointed: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS VALERIE JAMES Name and Title: JUAN HINVAL PRESIDENT _ Name and Title: Address: 1450 NE 170 STREET #306 1450 NE 170 STREET #326 Address: NORTH MIAMI BEACH, 12 33162 NORTH MIAMI BOACH FL. 33162 TED SHATH Name and Title: VICE-PLES Name and Title: Address: 1450 NE 190 STREET Address: NORTH MIAMI BEACH FL Name and Title: GEORGE SPEARS Treasure Name and Title: Address: 1450 NE 170 STREET #306 Address: NDETH MIAMI BEACH, FL ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: CMA ARTEAGA 2200 NW 102 AVE. Address: INCORPORATOR ARTICLE VII The name and address of the Incorporator is: Name: VALERIE JAMES Address: 1450 NE 170 STEEET WIT 326 NORTH MIAMI BEACH, FL Having been named as registered agent to accept service of process for the above stated corporation at the place stesignated in this certificate, Lam familias with and accept the appointment as registered agent and agree to act in this capacity 11-17-2010 Date Required Signature of Registered Agent 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 11-19-2010 Date