

P13000055902

(Requestor's Name)

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(City/State/Zip/Phone #)

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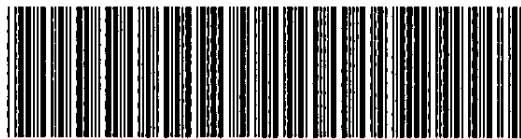
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
13 JUN 28 PM 4:11

7/1/13

COVER LETTER

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

SUBJECT: Community Miracle Resort & Spa, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 \$78.75
Filing Fee Filing Fee
& Certificate of Status

\$78.75	\$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
ADDITIONAL COPY REQUIRED	

FROM: Nicholas P. Sardelis, Jr., Esquire
Name (Printed or typed)

2033 Main St., Ste. 502
Address

Sarasota, FL 34237
City, State & Zip

(941) 366-1200
Daytime Telephone number

nps@sardelisandbowles.com
E-mail address: (to be used for future annual report notification)

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

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Community Miracle Resort & Spā, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5400 S. Biscayne Dr.

P.O. Box 7485

North Port, FL 34287

North Port, FL 34290

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: This corporation is organized for the
purpose of transacting any and all lawful business for which corporations
may be incorporated under Chapter 607, Florida Statutes as they now exist
or hereafter amended. To engage in and transact any lawful business for
which corporations may be incorporated under the Florida General Corporation
Act.

ARTICLE IV SHARES

The number of shares of stock is: 1000 shares of common stock

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Nelli Nagibekova, Pres. Name and Title: _____

Address 2280 East 26th St. Address: _____

Brooklyn, NY 11229

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

(cont)

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: Nicholas P. Sardelis, Jr., Esquire
Address: 2033 Main St., Ste. 502
Sarasota, FL 34237

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Nicholas P. Sardelis, Jr., Esquire
Address: 2033 Main St., Ste. 502
Sarasota, FL 34237

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/Registered Agent

JUNE 26, 2013
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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/Incorporator

JUNE 26, 2013
Date

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