

P14000049597

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

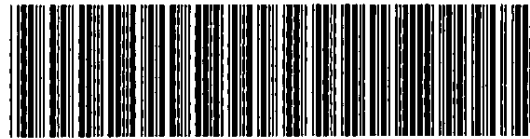
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/05/14--01009--007 **78.75

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SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS
14 JUN -5 AM 9:11

AKWJ 6/10/14

COVER LETTER

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

SUBJECT: **Mare Azur Miami Beach Luxury Apartments, 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: **Stephane Amar**

Name (Printed or typed)

6551 Collins Ave, Suite 802

Address

Miami Beach, Florida 33141

City, State & Zip

305-336-8581

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.

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: Mare Azur Miami Beach Luxury Apartments, inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

6551 Collins Ave., Suite 802

Miami Beach, Florida 33141

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide luxury rental units for short and long term business and vacationers.

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Maor Azulay, Vice President

Name and Title: _____

Address 6551 Collins Ave., Suite 802
Miami Beach, Florida 33141

Address: _____

Name and Title: Stephane Amar, President

Name and Title: _____

Address 6551 Collins Ave., Suite 802
Miami Beach, Florida 33141

Address: _____

Name and Title: Hernan Ortiz, Treasurer

Name and Title: _____

Address 6551 Collins Ave., Suite 802
Miami Beach, Florida 33141

Address: _____

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DIVISION OF CORPORATIONS
14 JUN -5 AM 9:11

(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:

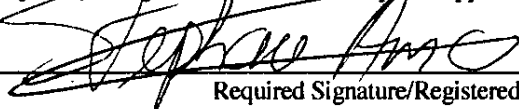
Name: Stephane Amar
Address: 6551 Collins Ave., Suite 802
Miami Beach, Florida 33141

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Stephane Amar
Address: 6551 Collins Ave., Suite 802
Miami Beach, Florida 33141

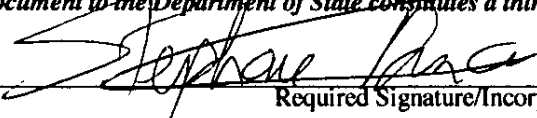
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

06/02/14
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

06/02/14
Date