

P220000080284

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

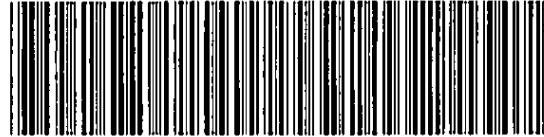
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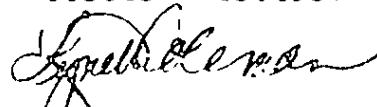
2022 OCT 20 PM 3:35

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 063643 4304937

AUTHORIZATION :



COST LIMIT : \$ 70.00

ORDER DATE : October 20, 2022

ORDER TIME : 1:55 PM

ORDER NO. : 063643-005

CUSTOMER NO: 4304937

DOMESTIC FILING

NAME: SFDC OWNERS' ASSOCIATION, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP
 ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland - EXT.

EXAMINER'S INITIALS: _____

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: SFDC Owners' Association, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1099 18th Street, Suite 2900, Denver, CO 80202

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Maintaining the common areas and elements of the common ownership development

ARTICLE IV SHARES

The number of shares of stock is: 40

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Matt DiVito, Director

Name and Title: John H. Owoc, Director

Address EverWest
1099 18th Street, Suite 2900
Denver, CO 80202

Address: Vital Pharmaceuticals, Inc.
1600 N. Park Drive
Weston, Florida 33326

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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DIVISION OF CORPORATIONS
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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: Corporation Service Company

Address: 1201 Hays Street

Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Matt DiVito, Director

Address: 1099 18th Street, Suite 2900

Denver, CO 80202

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

Alexxis Weibrod, assistant vice president

Required Signature/Registered Agent

10/20/2022

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.

[Signature]

Required Signature/Incorporator

Date

10/17/22

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