

REFERENCE # 840157

COST LIMET R

4320025

AUTHORIZATION #

ORDER DATE # February 8, 1996

ORDER TIME : 2:56 PM

ORDER NO. # 840157

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CUSTOMER NO.

4320025

CUSTOPIER: Ms. Lourdes C. Cambo

PACKMAN, NEUWAHL & ROSEPBERO

1500 San Remo Avenue

Suite 125

Coral Gables, FL 33146

DOMESTIC FILING

МОРИЕ::

FALLS REALTY, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: KAREN ROZAR

EXAMINER'S INITIALS:

T. BROWN FEB 1 2 1996

96 FEB -9 AN 9:34

SECRETARY OF STATE
TALLAMASSEE, FLORIDA

ARTICLES OF INCORPORATION

QF

FALLS REALTY, INC.

The undersigned incorporator hereby forms a corporation under Chapter 607 of the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

FALLS REALTY, INC.

The address of the principal office of this corporation shall be 9795 South Dixie Highway, Miami, Florida 33156, and the mailing address of the corporation shall be the same.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 500 shares of common stock having \$1.00 par value per share.

ARTICLE IV. REGISTERED AGENT

The street address of the initial registered office of the corporation shall be 1500 San Remo Avenue, Suite 125 Coral Gables, Florida 33146, and the name of the initial registered agent of the corporation at that address is Atrium Registered Agents, Inc.

ARTICLE V TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. DIRECTORS

All corporate powers shall be exercised by or under the authority of, and the business and affairs of the corporation managed under the direction of its Board of Directors, subject to any limitation set forth in these Articles of Incorporation. This corporation shall have two Directors, initially. The names and addresses of the initial members of the Board of Directors are:

Alvin Brown Dir.

9795 South Dixie Highway Miami, Florida 33156

Evelyn Brown

Same

Dir.

ARTICLE VII. OFFICERS

The name and addresses of the initial officers of the corporation who shall hold office for the first year of the corporation, or until their successors are elected or appointed are:

Alvin Brown Pres.

9795 South Dixle Highway Miami, Florida 33156

Evelyn Brown

Same

Sec.

ARTICLE VII. INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation:

Corporation Service Company 1201 Hays Street Tallahassee, Florida 32301

IN WITNESS WHEREOF, the undersigned agent of Corporation Service Company, has hereunto set their hand and seal of Corporation Service Company on February 8, 1996.

CORPORATION SERVICE COMPANY

Its Agent Laura R Dunla

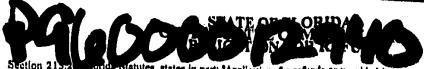
ACG/kbr

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 of 617.0501 FLOBIDAYS
STATUTES. THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF
FLORIDA.

1. The name	of the corporation let FABRA REAL	J.Y. ING.	THE REAL PROPERTY.
2. The name	and address of the registered agent	and office is:	SCALE TO SERVICE TO SE
	Atrium Registered Agents	Inc.	·
	1500 San Remo Avenue, Su		
	(P.O. Box or Mail Drop Box	NOI acceptable)	
	Coral Gables, FL 33146	i	
	to a maintened egent end to i	accent service of process	for the
Having bee above state the appoint to comply w formance of tion earego	on named as registered agent and to a nd compration at the place designated ment as registered agent and agree to with the provisions of all statutes relati f my duties, and I am familiar with and stored agent. REGISTERED AGENTS, INC.	in this certificate, I here o act in this capacity. I here ing to the proper and cor i accept the obligations of	by accept inher agree nplete per- if my posi-
	LIB STA	2.9.96	

(Signature)
ROBERT A. STAMEN, Vice President



Date Paid

Section 21 ... or or octatules, states in part: "Applications for refunde as provided in this section shall be filled with the Comptroller, except as otherwise provided bersin, within 3 years after the right to such refund shall have accrued else such right shall be parted." Three years is generally interpreted as meaning three years from the date of payment government which initially collected the money.

Pursuant to the provisions of Rule 3A-44.020, Fiorida Administrative Code, and Section 215.25, Fiorida Statutes, or Section ..., Florida Statutes, I hereby op by for a refund of moneys I paid into the State treatury, which are subject to refund. The following information is submitted to substantiate the claim.

____ EIN or SS#:

Certified true and corr	ect this 22 da	y of	Sept	, 19 97
Signature	allin	Stion	2 Prenie	Per t
Must be completed if	authority is other the	in Section 215.2	6, Florida Statutes	5.
cili (sec.				
	For	gency Use Only		
Substantiale the claim:	ovel of above claim and Amount of recomm	submits the following	ig Information to	
The omount requested ab		是其中的個別的問題		
Sale Tradurer's Receipt		daled <u>07/17</u> /		
Name of Account				
45	202130000000000000000000000000000000000	530000000	00010000	
Statutory Authority for Co				
L'arequeses hat paymen	t be made from the follow	ving account:		
NAME OF ACCOUNT:	A section of the state of a section of the section			
	2021300014	3000000	22002000	
Certified tris and correct	ha doyo,		. 19	

Name:

Address:

Reason for claim: O(gen)