# PAGO OD 7.1739 TRANSMITTAL LETTER FILES

96 AUS 26 FM 2-34

Maria Marana

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

SUBJECT: NUNICIPAL DEVELOPMENT CORP. (proposed corporate name)

Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation and check in the amount of  $\$\frac{122.50}{}$ .

Note: Additional copy of articles is needed only when certified copy is requested.

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#### ARTICLES OF INCORPORATION

<u>OF</u>

96 AUG 26 M 2: 34
PALLAMAN LOWDA

NUNICIPAL DEVELOPMENT CORP.

The undersigned incorporator(s), for the purpose of forming a corporation under the Fiorida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE | NAME

The name of the corporation shall be: MI

MUNICIPAL DEVELOPMENT CORP.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

890 S. Dixie Highway Coral Gables, Florida 33146

#### ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

Five (500) shares of common stock at \$1.00 par value each.

#### ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Gerhardt A. Schreiber 890 S. Dixie Highway Coral Gables, Florida 33146

### ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of incorporation is(are):

Gerhardt A. Schreiber 890 S. Dixie Highway Coral Gables, Florida 33146

20th	day of _	August	, 19 <u>96</u> .
*9		Sa	Signature/Title
	i .		Signature/fitle
			Signature/Title

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the tate of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1.	The name of the corporation is: MUNICIPAL DEVELOPMENT CORE	· 128 8 -11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2.	The name and address of the registered agent and office is:	8 2
	(NAME)	,
	890 S. Dixie Highway	
	(P.O. BOX NOT ACCEPTABLE)	
	Cornl Gables, Florida 33146	•
	(CITY/STATE/ZIP)	
	SIGNATURE (corporate	
	DATEAugust 20	
PF TH AN PF	AVING BEEN NAMED AS REGISTERED AGENT AND TO A ROCESS FOR THE ABOVE STATED CORPORATION AT THE PLANS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS NO AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO ROVISIONS OF ALL STATUTES RELATING TO THE PROPER ORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND A RONS OF MY POSITION AS REGISTERED AGENT.	REGISTERED AGENT O COMPLY WITH THE AND COMPLETE PER-
	SIGNATURE <u>Sa</u>	
	DATE	16

REGISTERED AGENT FILING FEE: \$35.00