TRANSMITTAL LETTER

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Eller Garage

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

SUBJECT:	_m.	(Proposed corpo	fate name - must include sul	-05/	15/9501	187834
Enclosed is an	original and o	ne(1) copy of t	he articles of incorpora	tion and a check	k for :	
لر	\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy		

FROM: Mackery Woods Home oursers Association 89 Pamala Place Sphappy City, State & Zip/ 3235-8 103/2/2 · 36-1036 (904) 962-2079 Day/me Telephone number

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

& Certificate



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

May 16, 1995

CHARLES CHAFIN MACKERY WOODS HOMEOWNERS ASSOC. 89 PAMALA PL. SOPCHOPPY, FL 32358

SUBJECT: MACKERY WOODS HOMEOWNERS ASSOCIATION Ref. Number: W95000010369

We have received your document for MACKERY WOODS HOMEOWNERS ASSOCIATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the corporation must contain a corporate suffix. This suffix may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. In the name of a non-profit corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6903.

Nancy Hendricks Corporate Specialist

Letter Number: 795A00025150

ARTICLES OF INCORPORATION

The undersigned, acting as incorporator(s) of a corporation pursuant to chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation:

ARTICLE I

The name of the corporation shall be:

Mackery Woods Home owners Association INC.

ARTICLE II

Principal place of business and mailing address

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

IN care of (Charles C. Chafin) 89 Pamala Place Sorchoppy, Fla. 32358

ARTICLE III Purpose(s)

The specific purpose(s) for which the corporation is organized is(are):

of having the road and ramp maintained In a resonable manner.

ARTICLE IV

Manner of election of directors

The manner in which the directors are elected or appointed is as follows:

They were elected at the annual cook out held on April 29 1995 by all the homeowners present.

ARTICLE V

Limitation of corporate powers

The corporate powers of this corporation are as provided in section 617.0302, Plorida Statutes, unless limited are as follows:

ARTICLE VI

Initial registered agent and street address

The name and the street address of the initial registered agent is:

Charles C. Chafin
Rt 1 Bot 576 (89 Pamala Place
Supchoppy, Fla. 32358

ARTICLE VII Incorporators

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

	, ,	
Pres,	Covis Rocco 23/3	Obbah Nene Tallahassee Ala
Vice Pres	BARNES R KENDRICK SR	84 MACKERY WOODS RP. SAFE
کو ر	Ivaphoe Carroll	17 Pamala Place 32358
Tres	Charles C. Chafin 89,	Obbah Nene Tallahassee Flagger 84 MACKERY WOODS RR. Soft 97 Pamala Place 32358 Sopehoppy, Fr. 22358 e Articles of Incorporation this 8 Hay of
	The undersigned incorporator has executed thes	e Articles of Incorporation this Siday of

Signature of Incorporator:

Have Q. Olaki Charles C. Chafin Typed name of incorporator signing

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE 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:
	Mackery Woods Home owners Association
2.	The name and address of the registered agent and office is:
	Charles Chafix
	R+ Box 576 (89 Partiale Place (P.O. Box or Mail Drop Box NOT ACCEPTABLE)
	Squaggy (CITY/STATE/ZIP) 32358

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(SIGNATURE) SIGNATURE) (DATE)