

N04000007453

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

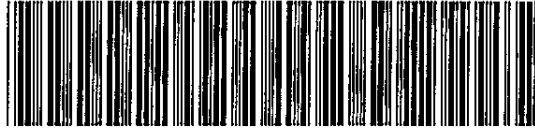
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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07/29/04--01030--010 \*\*78.75

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**TRANSMITTAL LETTER**

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

**SUBJECT:** American Trust for Historical Heritage, Inc  
**(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)**

Enclosed is an original and one(1) copy of the Articles of Incorporation and a check for :

\$70.00  
Filing Fee

\$78.75  
Filing Fee &  
Certificate of  
Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

**FROM:** Christopher J Fernandes  
Name (Printed or typed)

9763 Poplarwod Ct  
Address

Orlando, FL 32825  
City, State & Zip

(407) 677-6359  
Daytime Telephone number

04 JUL 29 911 1:32  
DIVISION OF CORPORATIONS

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

**ARTICLES OF INCORPORATION**  
In Compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

American Trust for Historical Heritage, Inc

**ARTICLE II PRINCIPAL OFFICE**

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

9763 Poplarwood Ct  
Orlando, FL 32825

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The preservation, restoration, conservation and education of historical structures, architecture, monuments, lands, and art through property easements and covenants, acquisition of historic properties for restoration and re-use, protection of public land, and education of historic restoration and preservation to the general public.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

Directors shall be appointed by the Board of Directors.

**ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS**

List name(s), address(es) and specific title(s):

Christopher J Fernandes  
President/Chief Director  
9763 Poplarwood Ct  
Orlando, FL 32817

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Matthew P Fernandes  
9763 Poplarwood Ct  
Orlando, FL 32817

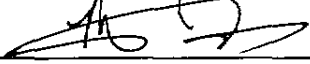
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

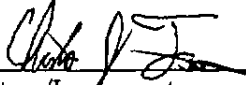
Christopher J Fernandes  
9763 Poplarwood Ct  
Orlando, FL 32817

04 JUL 29 PM 1:37  
SERIALIZED

\*\*\*\*\*  
*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.*

  
\_\_\_\_\_  
Signature/Registered Agent

7/27/2004  
Date

  
\_\_\_\_\_  
Signature/Incorporator

7/27/2004  
Date