

PO5000013148

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

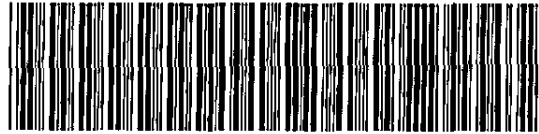
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400044960364

05/25/05 11:25 AM *JL

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
05 JAN 25 PM 12: 08

RECEIVED
05 JAN 25 AM 10: 59
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

eloverde Homes, Inc.

- Art of Inc. File _____
- LTD Partnership File _____
- Foreign Corp. File _____
- L.C. File _____
- Fictitious Name File _____
- Trade/Service Mark _____
- Merger File _____
- Art. of Amend. File _____
- RA Resignation _____
- Dissolution / Withdrawal _____
- Annual Report / Reinstatement _____
- Cert. Copy _____
- Photo Copy _____
- Certificate of Good Standing _____
- Certificate of Status _____
- Certificate of Fictitious Name _____
- Corp Record Search _____
- Officer Search _____
- Fictitious Search _____
- Fictitious Owner Search _____
- Vehicle Search _____
- Driving Record _____
- UCC 1 or 3 File _____
- UCC 11 Search _____
- UCC 11 Retrieval _____
- Courier _____

Signature _____

Requested by: SA
Name _____ Date 1/25/05 Time 10:00

Walk-In _____ Will Pick Up _____

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 JAN 25 PM 12: 08

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:
BELLAVERDE HOMES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:
PO BOX 2307
ST. LEO, FL 33574-2307

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
FOR PROVIDING REAL ESTATE SERVICES AND TO ENGAGE IN ANY LAWFUL
TRANSACTIONS IN THE STATE OF FLORIDA AND THE UNITED STATES.

ARTICLE IV SHARES

The number of shares of stock is:
1,000 (One Thousand)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):
M.A. KELLEHER PO BOX 2307 ST. LEO, FL 33574-2307 D/P

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:
TIMOTHY NEWLON 12146 CURLEY STREET SAN ANTONIO, FL 33576

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
M.A. KELLEHER PO BOX 2307 ST. LEO, FL 33574-2307

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

1-21-05
Date


Signature/Incorporator

1-22-05
Date