

P17000019614

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

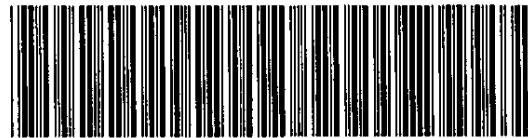
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 MAR -3 AM 8:52

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W17-015501

03/06/17



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 22, 2017

LINDA GODDARD
100 E. LINTON BLVD., #406B
DELRAY BCH., FL 33483

SUBJECT: RAINBERRY LAKE RECREATION AREA INC
Ref. Number: W17000015501

We have received your document for RAINBERRY LAKE RECREATION AREA INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The articles of incorporation of a nonprofit corporation must be prepared in compliance with section 617.0202, Florida Statutes. Please refer to that section of the law for assistance.

If you have any further questions concerning your document, please call (850) 245-6052.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 917A00003440

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REGISTRATION SERVICES
DIVISION OF CORPORATIONS

COVER LETTER

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

SUBJECT: RAINBERRY LAKE RECREATION AREA INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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 of
Status

ADDITIONAL COPY REQUIRED

FROM: Linda Goddard
Name (Printed or typed)
C/O BAIUP Accounting
100 E Linton Blvd #406B
Address
Delray Beach, Fl. 33483
City, State & Zip
561-272-2617
Daytime Telephone number
dhbunting638@yahoo.com
E-mail address: (to be used for future annual report notification)

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

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: RAINBERRY LAKE RECREATION AREA INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
RAINBERRY LAKE REC AREA, INC
C/O BAILUP ACCTG.
100E Linton BLVD #406B
DELRAY BEACH, FL 33483

Mailing address, if different is:
C/O BAILUP ACCTG
100E. LINTON BLVD #406B
DELRAY BEACH, FL 33483

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: A satellite account of
The Villas of Rainberry HOA, Inc. pays for maintaining
the recreational area facilities for the pool, spa,
security at front gate, tennis and basketball courts.

ARTICLE IV SHARES

The number of shares of stock is: 1

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TALLAHASSEE, FLORIDA

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Kathy Wickwire - Pres
Address: 940 Rainberry Lakesh
Delray Beach, FL
33445

Name and Title: Robert Bartoley - Security
Address: 2170 NW 10th Place
Delray Beach, FL
33445

Name and Title: Spide Goddard - VP/TREAS.
Address: 1150 NW 22ND AVE
Delray Beach, FL
33445

Name and Title: Steve Vitacolonna - Security
Address: 1070 NW 18th Ave
Delray Beach, FL
33445

Name and Title: Sara Covington - Sec.
Address: 2165 NW 14th St.
Delray Beach, FL
33445

Name and Title: _____
Address: _____

Name and Title: _____ Name and Title: _____
 Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: DIANA HURLEY
 Address: C/O GAFFUP ACCOUNTING
100 E. LINTON BLVD # 406B
DELRAY BEACH, FL 33483

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Linda Goddard
 Address: 1130 NW 22ND AVE.
DELRAY BEACH, FL 33445

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

Alexis F Hurley _____ 2/7/17 _____
 Required Signature/Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Linda Goddard _____ 2/9/17 _____
 Required Signature/Incorporator Date