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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

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DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

8/9

TRANSMITTAL LETTER

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

SUBJECT: Seven Gables Corp
(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: Sharon L. Trudgeon
Name (Printed or typed)

P.O. Box 2426, 2
Address

Oneco FL 34264
City, State & Zip

850 514 1186
Daytime Telephone number

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:

Seven Gables Corp

ARTICLE II PRINCIPAL OFFICE

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

Manatee Co. P.O. Box 2426, Oneco Fl.
Zip 34264

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide a safe loving home for simi to moderate mentally challenged Ladies.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

self appointed

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Sharon L. Trudgeon
4121 Scarlett Dr.
Tallahassee Fl. 32303

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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


Sharon L. Trudgeon
4121 Scarlett Dr.
Tallahassee Fl. 32303

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Sharon L. Trudgeon
4121 Scarlett Dr.
Tall. Fl. 32303

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

8-8-2004
Date


Signature/Incorporator

8-8-2004
Date