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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP☐ WAIT☐ MAIL

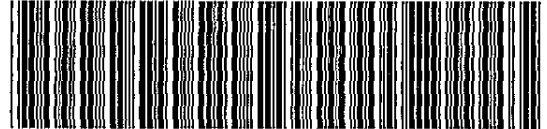
(Business Entity Name)

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CAPITAL CONNECTION, INC.

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

Maines Hamlet POA, Inc

Signature _____

Requested by: *WC*

Name _____

Date *4/15*

Time *9:00*

Walk-In _____

Will Pick Up _____

☒ 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 _____

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AND
FILED

05 APR 15 PM 2:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

OF

Maines Hamlet POA, Inc.

The undersigned, for the purpose of forming a not for profit corporation under Chapter 617, Florida Statutes, does hereby adopt the following Articles of Incorporation:

ARTICLE I: NAME

The name of the corporation is **Maines Hamlet POA, Inc.**

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is **17050 West Highway 328, Dunnellon, FL. 34432**

ARTICLE III: PURPOSE

The sole purpose of this non profit corporation is to manage the affairs of the property owners association.

ARTICLE IV: QUALIFICATION

The qualifications for members and the manner of their admission are stated in the bylaws of the corporation.

ARTICLE V: INITIAL REGISTERED OFFICE AND AGENT

The initial registered office and agent of the corporation is **William A. Post, Esq., 20702 W. Pennsylvania Ave., Dunnellon, FL. 34431**

ARTICLE VI: INITIAL BOARD OF DIRECTORS / OFFICERS

The manner in which the directors are elected is stated in the corporate bylaws. The name and address of each person who is to serve as a member of the initial Board of Directors / Officers of the corporation is:

Carl D. Maines, 17050 West Highway 328, Dunnellon, FL. 34432

Anjanette Maines, 17050 West Highway 328, Dunnellon, FL. 34432

William A. Post, 20702 West Pennsylvania Ave., Dunnellon, FL. 34431

ARTICLE VII: NON-STOCK BASIS

The corporation is organized under a non-stock basis.

ARTICLE VIII: DISSOLUTION

In the event of dissolution , the residual assets of the corporation will be turned over to one or more organizations which themselves are exempt organizations described in sections 501(c) (3) and 170 (c) (2) of the Internal Revenue Code of 1954 or corresponding sections of any prior or future law, or to the Federal, State or local government for exclusive public purpose.

ARTICLE IX: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Your Capital Connection, Inc., 417 East Virginia Street, Suite 1, Tallahassee, Florida 32301.

ARTICLE X: AMENDMENTS

The corporation reserves the right to amend or repeal any provisions of these Articles of Incorporation, or any amendment(s) thereto.

ARTICLE XI: CORPORATE POWERS

The corporate powers of this corporation are as provided in section 617.0302, Florida Statutes.

The undersigned incorporator has executed these Articles of Incorporation this 15th day of April 2005.

"Your Capital Connection, Inc. by Weimar Lopez, Client Representative"

A handwritten signature in black ink, appearing to read 'Weimar Lopez', is written over a horizontal line.

APPROVED
AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned 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: _____

Maines Hamlet POA, Inc.

2. The name and street address of the registered agent and office is: _____

WILLIAM A. POST, ESQ.

20702 W. PENNSYLVANIA AVE.

DUNNELLON, FL 34431

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE 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.

William A Post