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COVER LETTER

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

SUBJECT: ORIGINAL VIRGINIA CLUB INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

enciosed is an original at	nd one(1) copy of the Art	icles 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: MALINE E SNEAD
Name (Printed or typed)

1423 YALPARAISO St
Address

The VIIIAges, Pl 32162
City, State & Zip

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 news of the composition shall be	
The name of the corporation shall be: ORIGINAL VIRGINIA CLUB INC.	· · · · · · · · · · · · · · · · · · ·
	08 FEB 11 PM 2: 31
The principal place of business and mailing address of this corpora PARADISE REC Cerrier	SECRETARY OF STATE TALLAHASSEE. FLORIDA
1403 PARADISE CONTOR LADY LAKE, FI 32159 ARTICLE III PURPOSE	
The purpose for which the corporation is organized is: TO FORM a Social Club for	all previous residents.
of the State of VIRGINIA.	It, will BE A NOW Profit
of the State of VIRGINIA. ORGANIZATION WITH MO SULL ARTICLE IV MANNER OF ELECTION	HAVE EIN # FOR CHECKING ACCOUNT
The manner in which the directors are elected or appointed: DIRECTOR Precented by STATE from the floor and selected	of officers or morningtions
The Membership.	J 2
ARTICLE V INITIAL DIRECTORS AND/OR OFFICEI	<u>RS</u>
1428 VAIDARAISO ST	MAXINE E SNEAD 1423 VAIDARAISO ST THE VILLAGES FI 32162
The Villages +1 32162	
ROBOTT BARADM BOB MIRANDA WAY The Villages fl 32159	LORETTA GRIMM GET MARINO DR The VILLAGES FT 32159
ARTICLE VI INITIAL REGISTERED AGENT AND ST	TREET ADDRESS
The name and Florida street address (P.O. Box NOT acceptab	le) of the registered agent is:
MAXINE SNEAD 1423 YAIDABAISO ST	
The VILLAGES, FI 32162	
ARTICLE VII INCORPORATOR	•
The <u>name and address</u> of the Incorporator is:	,
ILDS YALDABAISD ST	· ·
The VIII 4302, 4,1 35167	*******
Having been named as registered agent to accept service of process for the in this certificate, I am familiar with and accept the appointment as register	above stated corporation at the place designated
Maline Snead	2-1-08
Signature/Registered Agent Maxine Snead	Date
Maline Inoal	1-7-08
Signature/Incorporator	Date
MAXINE Snead	