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142 EAST NEW YORK AVENUE DELAND, FLORIDA 32724 PHONE: 386-734-3020 FACSIMILE: 386-734-3096

December 20, 2013

505 DELTONA BOULEVARD SUITE 105 DELTONA, FL 32725 PHONE: 386-574-5634 FACSIMILE: 386-574-5665

REPLY TO: DELTONA

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

Re: Stonebridge Subdivision Homeowners Association, Inc.

Dear Sir/Madam:

Enclosed please find an original and one (1) copy of the Articles of Incorporation for the above-referenced matter. Also enclosed please find my client's check in the amount of \$70.00 for the filing fee. I have included a self-addressed stamped envelope for your convenience. Should you have any questions, please do not hesitate to contact my office.

Very truly yours,

Darren J. Elkillo

DJE/kk Enclosures #29732

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME The name of the corporation shall be: STONEBRID	STONEBRIDGE SUBDIVISION HOMEOWNERS ASSOCIATION, INC.		
ARTICLE II PRINCIPAL OFFICE			
Principal <u>street</u> address: 141 E. Michigan Avenue	Mailing address, if different is:		
Lake Helen, FL 32744			
ARTICLE III PURPOSE The purpose for which the corporation is organized is	Homeowners Association		
	Co Co	\$ 1 \$2 \$2 \$2	
**************************************	0EC 2	82, 58, 58,	
	TO THE COMMENT OF THE	R	
	<u></u>	365 25	
ARTICLE IV MANNER OF ELECTION	The manner in which the directors are elected and appointed:	by	
Members	··		
ARTICLE V INITIAL OFFICERS AND/O	R DIRECTORS		
Name and Title: BRYAN S. HARDY, PR	ES. Name and Title:		
Address 141 E. MICHIGAN A			
LAKE HELEN, FL 327			
Name and Title:	Name and Title:		
Address	Address:		
Name and Title:	Name and Title:		
Address			

Name and Title:_	*** ** ** ** ** * * * ** ** ** * * * *	Name and Title:	
Address		Address:	SECRETARY OF STATE
			2013 DEC 20
			2013 DEC 23 PH 3: 53
lame and Title:_		Name and Title:	
ddress			
iddiess		_ Address	
			
_			
ARTICLE VI	REGISTERED AGENT		
	orida street address (P.O. Box NOT acce	ptable) of the registered	d agent is:
Name:	BRYAN S. HARDY		
	141 E. MICHIGAN AV	 F	
Address:			
	LAKE HELEN, FL 327	44	•
ARTICLE VII	INCORPORATOR Idress of the Incorporator is:		
,	BRYAN S. HARDY		
Name:			
Address:	141 E. MICHIGAN AV	É.	
	LAKE HELEN, FL 3	2744	
Having been nai	med as registered agent to accept service	of process for the abo	ove stated corporation at the place designated in t
certificate, I am j	familiar with and accept the appointment	as registered agent and	l agree to act in this capacity
	0 9		12/17/13
790	Required Signature of Registered	d Agent	Date
submit this doc	• •	ein are true. I am awai	re that any false information submitted in a docum
	100		12/12/12
16)	Required Signature of Inco	rporator	12/1/13 Date
	Required Signature of Inco	ιροιαιοι	Dute

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