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D O'KEEFE

JUL 17 2019

FILED  
19 JUL 16 PM 2:43  
TALLAHASSEE, FLORIDA

W19-49840



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 22, 2019

LJ ARNOLD IV  
PO BOX 1570  
GCS, FL 32043

SUBJECT: WATER OAK RIDGE COMMUNITY ASSOCIATION, INC.  
Ref. Number: W19000049840

We have received your document for WATER OAK RIDGE COMMUNITY ASSOCIATION, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

★ Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

DANIEL L O'KEEFE  
Regulatory Specialist II

Letter Number: 619A00010366

★ See corrected document enclosed

ENCLOSURE

## COVER LETTER

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

**SUBJECT:** Water Oak Ridge Community Association, Inc.

(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:** LJ Arnold IV  
\_\_\_\_\_  
Name (Printed or typed)

PO Box 1570  
\_\_\_\_\_  
Address

GCS, FL 32043  
\_\_\_\_\_  
City, State & Zip

904 284-5618  
\_\_\_\_\_  
Daytime Telephone number

arnoldlawyers@gmail.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 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be: Water Oak Ridge Community Association, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
718 N. Orange Avenue

GCS, FL 32043

Mailing address, if different is:  
PO Box 1570

GCS, FL 32043

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_  
for the sole purpose of assigning all of its rights, duties and obligations as set forth in the Water Oak  
Ridge Plat Book 51 Page 29 of the public records of Clay County, Florida, from Water Oak Ridge  
Community Association, Inc. to Water Oak Ridge Estates Homeowners Association, Inc.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: appointed by ORE Inc.

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Scott Milgram, President Name and Title: \_\_\_\_\_

Address PO Box 1570 Address: \_\_\_\_\_

GCS, FL 32043 \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED  
DATE 10-16-2019 BY 60322  
19 JUL 16 PM 2:49

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: L. J. Arnold IV  
Address: 718 N. Orange Ave  
GCS, FL 32043

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TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: L. J. Arnold IV  
Address: 718 N. Orange Ave  
GCS, FL 32043

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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]  
Required Signature/Registered Agent

July 2, 2019  
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.*

[Signature]  
Required Signature/Incorporator

July 2, 2019  
Date