

N20000013239

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

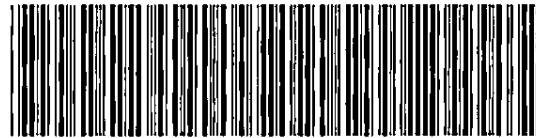
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COVER LETTER

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

SUBJECT: SILVERLEAF AT HAMLIN PROPERTY OWNERS' 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: Godbold, Downing, Bill & Rentz, P.A.

Name (Printed or typed)

222 W. Cornstock Avenue, Suite 101

Address

Winter Park, FL 32789

City, State & Zip

407-647-4418

Daytime Telephone number

khoran@gdb-law.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: SILVERLEAF AT HAMLIN PROPERTY OWNERS' ASSOCIATION, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
1750 W. Broadway, Suite 111

Oviedo, FL 32765

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To operate and maintain a property owners' association.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: _____
_____ By appointment pursuant to the Bylaws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Richard A. Jerman, Director

Address: 1750 W. Broadway, Suite 111
Oviedo, FL 32765

Name and Title: Denver Marlow, Director

Address: 1750 W. Broadway, Suite 111
Oviedo, FL 32765

Name and Title: Trina Dziewior, Director

Address: 1750 W. Broadway, Suite 111
Oviedo, FL 32765

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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: Richard A. Jerman _____

Address: 1750 W. Broadway, Suite 111 _____

Oviedo, FL 32765 _____

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Richard A. Jerman _____

Address: 1750 W. Broadway, Suite 111 _____

Oviedo, FL 32765 _____

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

Required Signature of Registered Agent

11/13/20

Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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.

Required Signature of Incorporator

11/13/20

Date