

N22000010781

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700393540417

08/06/22--01042--009 **70.00

SECRETARY OF STATE
FALLMOUNTAIN, VT

22 SEP -6 PM 1:25

FILED

COVER LETTER

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

SUBJECT: LEXINGTON MEWS REVELATIONS IN HOUSING 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: STEVEN WARM

Name (Printed or typed)

3867 SW 93RD TERRACE

Address

GAINESVILLE, FL 32608

City, State & Zip

352-373-8279

Daytime Telephone number

SW@stevenwarm.com

E-mail address: (to be used for future annual report notification)

FILED
22 SEP -6 PM 1:25
SECRETARY OF STATE
TALLAHASSEE, FL 32314

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: LEXINGTON MEWS REVELATIONS IN HOUSING INC

ARTICLE II PRINCIPAL OFFICE

Principal street address:

3867 SW 93rd Terrace

Gainesville, FL 32608

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: This corporation is organized exclusively for charitable, religious,
educational and scientific purposes with an initial focus on providing and promoting affordable housing and including for
such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501((c)(3) of the
Internal Revenue code, or the corresponding section of any future federal tax code.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

By majority vote of the Directors then in office or by Declaration should there be only one.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: WANDA COLLIER, DIRECTOR

Address: 14018 NW 23rd Ave.
GAINESVILLE, FL 32606

Name and Title: _____

Address: _____

Name and Title: McKINLEY COLLIER, DIRECTOR

Address: 14018 NW 23rd Ave.
GAINESVILLE, FL 32606

Name and Title: _____

Address: _____

Name and Title: LLOYD J. PREVOST, DIRECTOR

Address: 11661 Kismet Ave.
Lake View Terrace, CA 91342

Name and Title: _____

Address: _____

22 SEP -6 PM 1:25
SECRETARY OF STATE
TALLAHASSEE, FL 32399

FILED

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: STEVEN WARM, ESQUIRE

Address: 3867 SW 93RD TERRACE

GAINESVILLE, FL 32608

ARTICLE VII INCORPORATOR

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

Name: STEVEN WARM, ESQUIRE

Address: 3867 SW 93RD TERRACE

GAINESVILLE, FL 32608

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

08/31/2022

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

08/31/2022

Date

FILED
22 SEP - 6 PM 1:25
SECRETARY OF STATE
TALLAHASSEE, FL 32304

**LEXINGTON MEWS REVELATIONS IN HOUSING INC ARTICLES OF
INCORPORATION**

**ARTICLE IX: PROVISIONS REGARDING THE DISTRIBUTION OF ASSETS UPON
DISSOLUTION**

Upon the dissolution or winding up of this corporation, its assets remaining after payment, or provisions for payment, of all debts and liabilities of this corporation shall be distributed to a nonprofit fund, foundation or corporation which is organized and operated exclusively for charitable, educational and/or religious purposes and which has established it tax-exempt status under Internal Revenue code section 501(c)(3).

FILED

22 SEP -6 PM 1:25

**SECRETARY OF STATE
FALL ARMS ST. 1001**

COVER LETTER

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

SUBJECT: LEXINGTON MEWS REVELATIONS IN HOUSING 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: STEVEN WARM

Name (Printed or typed)

3867 SW 93RD TERRACE

Address

GAINESVILLE, FL 32608

City, State & Zip

352-373-8279

Daytime Telephone number

SW@stevenwarm.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FL 32314

22 SEP -6 PM 1:25

FILED

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 LEXINGTON MEWS REVELATIONS IN HOUSING INC
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address:
3867 SW 93rd Terrace
Gainesville, FL 32608

Mailing address, if different is: _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: This corporation is organized exclusively for charitable, religious, educational and scientific purposes with an initial focus on providing and promoting affordable housing and including for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501((c)(3) of the Internal Revenue code, or the corresponding section of any future federal tax code.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

By majority vote of the Directors then in office or by Declaration should there be only one.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: WANDA COLLIER, DIRECTOR

Address: 14018 NW 23rd Ave.
GAINESVILLE, FL 32606

Name and Title: _____

Address: _____

Name and Title: MCKINLEY COLLIER, DIRECTOR

Address: 14018 NW 23rd Ave.
GAINESVILLE, FL 32606

Name and Title: _____

Address: _____

Name and Title: LLOYD J. PREVOST, DIRECTOR

Address: 11661 Kismet Ave.
Lake View Terrace, CA 91342

Name and Title: _____

Address: _____

22 SEP -6 PM 1:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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: STEVEN WARM, ESQUIRE

Address: 3867 SW 93RD TERRACE

GAINESVILLE, FL 32608

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: STEVEN WARM, ESQUIRE

Address: 3867 SW 93RD TERRACE

GAINESVILLE, FL 32608

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.

FILED
22 SEP - 6 PM 1:25
TALLAHASSEE
SECRETARY OF STATE

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

08/31/2022

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

08/31/2022

Date

**LEXINGTON MEWS REVELATIONS IN HOUSING INC ARTICLES OF
INCORPORATION**

**ARTICLE IX: PROVISIONS REGARDING THE DISTRIBUTION OF ASSETS UPON
DISSOLUTION**

Upon the dissolution or winding up of this corporation, its assets remaining after payment, or provisions for payment, of all debts and liabilities of this corporation shall be distributed to a nonprofit fund, foundation or corporation which is organized and operated exclusively for charitable, educational and/or religious purposes and which has established its tax-exempt status under Internal Revenue code section 501(c)(3).

FILED

22 SEP -6 PM 1:25
SECRETARY OF STATE
TALLAHASSEE FL 32301