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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

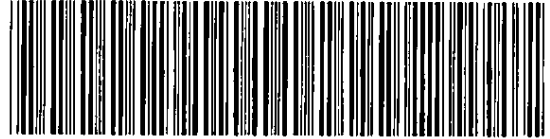
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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S. CHATHAM
OCT 10 2023

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OCT 11 PM 3:42 2023 OCT 11 AM 11:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 11, 2023

COGENCY GLOBAL INC.

SUBJECT: HIDEAWAY SHORES PROPERTY OWNER'S ASSOCIATION, INC.
Ref. Number: W23000139789

We have received your document for HIDEAWAY SHORES PROPERTY OWNER'S ASSOCIATION, INC.. However, the document has not been filed and is being returned for the following:

The document does not meet the minimum number of director's requirement. According to Florida Statute 617.0803 a board of directors must consist of three or more individuals.,

If you have any further questions concerning your document, please call (850) 245-6000.

Summer Chatham
Regulatory Specialist III
Director's Office

Letter Number: 723A00023580

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2023 OCT 17 AM 11:51
DIRECTOR'S OFFICE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 1200000000088

Date: 10/17/2023

Name: Juliana

Reference #: 2148297

Entity Name: HIDEAWAY SHORES PROPERTY OWNER'S ASSOCIATION, INC.

- ☒ Articles of Incorporation/Authorization to Transact Business
- ☐ Amendment
- ☐ Change of Agent
- ☐ Reinstatement
- ☐ Conversion
- ☐ Merger
- ☐ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☒ Other Please keep original filing date. Provide certified copies and good standing

Authorized Amount: \$87.50

Signature: Juliana Prestia

COVER LETTER

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

SUBJECT: Hideaway Shores Property Owner's 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: Jones Walker LLP
Name (Printed or typed)

201 S. Biscayne Blvd., Suite 3000
Address

Miami, FL 33131
City, State & Zip

305-679-5747
Daytime Telephone number

nkatsaras@joneswalker.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: Hideaway Shores Property Owner's Association, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
800 Winward Drive

Suite B

Covington, LA 70433

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: 1. To acquire title in fee simple or by one or by one or more perpetual
easements to certain real property in Walton County, Florida, to be used in connection with a residential real estate subdivision
consisting of sixteen (16) Lots known as Hideaway Shores (the "Development"). 2. To develop private roads, easements and other
rights-of-way within the development. 3. To construct, maintain, repair, replace, operate, manage and care for all lakes, ditches, canals,
retention or detention areas, drainage or other surface water management works, and provide for the perpetual maintenance and repair
to common area roads and other common areas of the Development for the benefit of owners of Lots within the Development. 4. To
levy and collect assessments against owners of Lots for the cost of maintenance.

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

Elected by Lot Owner majority vote upon turnover by Developer.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Stephanie Cain, Secretary/Director

Address 800 Winward Drive, Suite B

Covington, LA 70433

Name and Title: William Cain, President/Director

Address: 800 Winward Drive, Suite B

Covington, LA 70433

Name and Title: Shelby Cain, Director

Address 800 Winward Drive, Suite B

Covington, LA 70433

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

2007 11 27 3:42

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: Northwest Registered Agent LLC

Address: 7901 4th St N STE 300

St. Petersburg FL 33702

ARTICLE VII INCORPORATOR

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

Name: Jones Walker LLP

Address: 201 S. Biscayne Blvd., Suite 3000

Miami, FL 33131

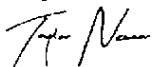
ARTICLE VIII EFFECTIVE DATE:

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



10/09/2023

Required Signature of Registered Agent

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.



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