

N240W003925

(Requestor's Name)

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☐ PICK-UP

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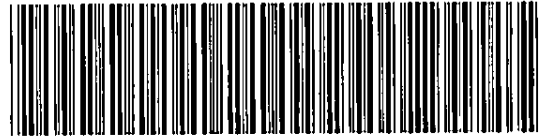
(Business Entity Name)

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TALLAHASSEE, FL

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15

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Lake Claire Waterfront Owners, Inc.

Please Debit FCA000000003 For: 70

Thank you Seth Neeley



Signature

Requested by:

Name

Date

Time

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____ Art of Inc. File _____
____ UTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
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____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
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COVER LETTER

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

SUBJECT: LAKE CLAIRE WATERFRONT OWNERS, 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: WYNN & ASSOCIATES, PLLC

Name (Printed or typed)

430 WEST 5TH STREET, SUITE 400

Address

PANAMA CITY, FLORIDA 32401

City, State & Zip

850.303.7800

Daytime Telephone number

NICOLE@WYNNPLLC.COM
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

FILED
JAN 11 2007
TALLAHASSEE, FL
CLERK OF SUPERIOR COURT

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: LAKE CLAIRE WATERFRONT OWNERS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address:

451 SUDDUTH AVENUE

PANAMA CITY, FLORIDA 32401

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: THE PRESERVATION AND MAINTENANCE OF LAKE CLAIRE AND ANY AND ALL LAWFUL ACTIVITIES IN CONNECTION WITH EFFECTUATING THE ABOVE STATED PURPOSE

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: ELECTED
VIA METHOD IN BYLAWS

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: WEEMS ROLAND MCARTHUR, JR | D

Address: 451 SUDDUTH AVENUE

PANAMA CITY, FL 32401

Name and Title: MICHAEL LATIOLAIS | D

Address: 449 SUDDUTH AVENUE

PANAMA CITY, FL 32401

Name and Title: CHRISTY TRAWICK MCARTHUR | D

Address: 451 SUDDUTH AVENUE

PANAMA CITY, FL 32401

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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: WYNN & ASSOCIATES, PLLC

Address: 430 WEST 5TH ST, SUITE 400
PANAMA CITY, FL 32401

ARTICLE VII INCORPORATOR

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

Name: WEEMS ROLAND MCARTHUR, JR.

Address: 451 SUDDUTH AVENUE
PANAMA CITY, FLORIDA 32401

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

Nicole F. Hines

Required Signature of Registered Agent

2/26/2024
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.

W. E. McArthur, Jr.

Required Signature of Incorporator

03/26/2024
Date

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

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