PC00000019405 Department of State

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

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SUBJECT:	South La (Proposed corpo	Ke Fence, 1 prate name - must include su	nc.	18—1 22—005 ****70.00	
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 of Status		
t	į	ADDITIONAL CO	PY REQUIRED		
FROM:	Name (Printed or typed)				
	Orlando, FL 32810 City, State & Zip				
407-948-4820					
Daytime Telephone number					
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			y,		

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

South Lake Fence Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

6800 N. Orange Blosson. Trail Orlando, Fl 32810

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADD

The name and Florida street address of the initial registered agent are:

Bryan Santana

6800 N. Orange Blossom Trail. Orlando, Fr. 32810

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

Bryan Santana

6800 N. orange Blossom Trail

Signature Incorporator

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Date

onded Thru Notary Public Underwitte