POOOOOOAA16

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

SUBJECT: ST JOHNS BLUFF PROPERTIES, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
		<u>**</u> :	00003444 -10/30/00 *****87.50	19511 01146-004 *****87.50
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 ADDITIONAL COP	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:		PROPERTIES, INC.		
118 JACKSON ROAD #9 Address				n i ti ti ies
	JACKSDNUILLE, FL 32 City, S 904 642-0286		SECRETARY OF STATE TALLAHASSEE FLORIDA	Section 5

 ${f NOTE:}$ Please provide the original and one copy of the articles.

0/10/31

ARTICLES OF INCORPORATION

(In compliance with Chapter 607 and/or Chapter 621, F.S.(profit))

ARTICLE I NAME

The name of the corporation shall be:

St. Johns Bluff Properties, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Address:

1815 Corporate Square Boulevard Suite 200 Jacksonville, FL 32216

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To conduct all business relating to property, construction, real estate management and any and all other business related to property rental and real estate.

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es):

President
Philip Sciabarasi
118 Jackson Road Suite 9
Jacksonville, FL 32225

Vice President
Sherman G. Westmoreland
1815 Corporate Square Boulevard
Suite 200
Jacksonville, FL 32216

OO OCT 30 PN 1:40
SECREMANT OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

President Philip Sciabarasi 118 Jackson Road Suite 9 Jacksonville, FL 32225

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Philip Sciabarasi 118 Jackson Road #9 Jacksonville, FL 32225 00 OCT 30 PM 1: 40
SECRETAGY OF STATE
TALLAHASSEE, FLORIDA

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

Signature/Registered Agent

Date

Signature/Incorporator

Date