

TRANSMITTAL LETTER

P01000038715

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 APR 17 PM 1:26

APPROVED
AND
FILED

SUBJECT:

CAPITAL LAND GROUP, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

900004010680--B
-04/17/01--01059--021
*****78.75 *****78.75

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

ADDITIONAL COPY REQUIRED

FROM:

CHRISTOPHER D. JOHNSTON

Name (Printed or typed)

2112 HIGH ROAD

Address

TALLAHASSEE, FL 32307

City, State & Zip

850-524-3433

Daytime Telephone number

DIVISION OF CORPORATION

01 APR 17 PM 1:26

RECEIVED

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

4/17

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:

CAPITAL LAND GROUP, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 14121
Tallahassee, FL 32317-4121

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

REAL ESTATE SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

President — Ormand Zane Lawson III
Secretary — Ormand Zane Lawson III
Treasurer — Ormand Zane Lawson III

ARTICLE VI REGISTERED AGENT

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

CHRISTOPHER D. JOHNSTON
2112 HIGH ROAD, TALLAHASSEE, FL 32303

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CHRISTOPHER D. JOHNSTON
2112 HIGH ROAD, TALLAHASSEE, FL 32303

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
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