

P010000255476

TRANSMITTAL LETTER

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

SUBJECT: ALL FLORIDA MOBILE HOMES, 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 of  
Status

ADDITIONAL COPY REQUIRED

FROM: THOMAS Mc GARRY  
Name (Printed or typed)

521 SW 59<sup>th</sup> ST. SUITE 101  
Address

OCALA, FL 34474  
City, State & Zip

352-291-5351  
Daytime Telephone number

FILED  
01 JUN -5 PM 3:59  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

900004342129--7  
-06/05/01-01082-012  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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

4  
D. WHITE JUN - 5 2001

**ARTICLES OF INCORPORATION  
OF  
ALL FLORIDA MOBILE HOMES, INC.**

**FILED**  
01 JUN -5 PM 3:59  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

**ARTICLE I    NAME**

The name of the Corporation shall be:

*ALL FLORIDA MOBILE HOMES, INC.*

The principal place of business of this corporation shall be:

*521 S.W. 59<sup>TH</sup> STREET  
SUITE 101  
OCALA, FL 34474*

**ARTICLE II    NATURE OF BUSINESS**

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

**ARTICLE III    CAPITAL STOCK**

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is 1,000 with a par value of \$1.00 each

**ARTICLE IV    TERM OF EXISTENCE**

This corporation is to exist perpetually.

**ARTICLE V    OFFICERS DIRECTORS**

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

*JOSEPH C. PARKS,  
PRESIDENT \ SECRETARY & DIRECTOR  
521 S.W. 59<sup>TH</sup> STREET  
SUITE 101  
OCALA, FL 34474*

*THOMAS MC GARRY  
VICE PRESIDENT \ TREASURER & DIRECTOR  
521 S.W. 59<sup>TH</sup> STREET  
SUITE 101  
OCALA, FL 34474*

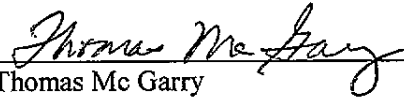
**ARTICLE VI INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is (are):

THOMAS MC GARRY  
521 S.W. 59<sup>TH</sup> STREET  
SUITE 101  
OCALA, FL 34474

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 1<sup>st</sup> day of JUNE , 2001.

Signature (s) of Incorporator(s)


  
Thomas Mc Garry

STATE OF FLORIDA

COUNTY OF Martin

THE FOREGOING instrument was acknowledged and sworn to before me this 1<sup>st</sup> day of June, 2001, by Thomas McGarry, of ALL FLORIDA MOBILE HOMES, INC.



  
Notary Public  
5/1/04  
My Commission Expires:

FILED

**CERTIFICATE DESIGNATING  
REGISTERED AGENT / REGISTERED OFFICE**

01 JUN -5 PM 3:59

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office / registered agent, in the State of Florida.

1. The name of the corporation is: *ALL FLORIDA MOBILE HOMES, INC.*
2. The name and address of the registered agent and office is:

*THOMAS Mc GARRY  
521 S.W. 59<sup>TH</sup> STREET  
SUITE 101  
OCALA, FL 34474*

  
\_\_\_\_\_  
SIGNATURE (CORPORATE OFFICER)

*PRESIDENT*  
\_\_\_\_\_  
TITLE

*6-4-01*  
\_\_\_\_\_  
DATE

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

  
\_\_\_\_\_  
SIGNATURE (REGISTERED AGENT)

*6-4-01*  
\_\_\_\_\_  
DATE

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PRESIDENT \ SECRETARY & DIRECTOR  
521 S.W. 59<sup>TH</sup> STREET  
SUITE 101  
OCALA, FL 34474*

*THOMAS MC GARRY  
VICE PRESIDENT \ TREASURER & DIRECTOR  
521 S.W. 59<sup>TH</sup> STREET  
SUITE 101  
OCALA, FL 34474*

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THOMAS MC GARRY  
521 S.W. 59<sup>TH</sup> STREET  
SUITE 101  
OCALA, FL 34474

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Signature (s) of Incorporator(s)

  
Thomas Mc Garry

STATE OF FLORIDA

COUNTY OF MANASSA

THE FOREGOING instrument was acknowledged and sworn to before me this 1<sup>st</sup> day of June, 2001, by Thomas McGarry, of ALL FLORIDA MOBILE HOMES, INC.



  
Notary Public  
5/1/04  
My Commission Expires:

FILED

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REGISTERED AGENT / REGISTERED OFFICE**

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SUITE 101  
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SIGNATURE (CORPORATE OFFICER)

*PRESIDENT*  
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*Thomas McGarry*  
\_\_\_\_\_  
SIGNATURE (REGISTERED AGENT)

*6-4-01*  
\_\_\_\_\_  
DATE