

TRANSMITTAL LETTER

Pod0000052559

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

FILED  
02 MAY -8 PM 12:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: 5100 Buckingham Road, Inc.

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: Duncan & Tardif, P.A.  
P.O. Box 249  
Ft. Myers, Florida 33902  
941 334-4574

700005491987--6  
-05/08/02--01048--011  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Please provide the original and one copy of the articles.

9/5/13

## 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:

5100 Buckingham Road, Inc.

### ARTICLE II PRINCIPAL OFFICE

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

8695 College Parkway, Suite 355  
Fort Myers, Florida 33919

### 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 ADDRESS

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

Frank D'Alessandro  
8695 College Parkway, Suite 355  
Fort Myers, Florida 33919

### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Frank D'Alessandro  
8695 College Parkway, Suite 355  
Fort Myers, Florida 33919



Signature/Incorporator

4-29-02

Date

*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*



Signature/Registered Agent

4-29-02

Date

FILED  
02 MAY -8 PM 12:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA