Poacousa65

k		
(Re	equestor's Name)	
(Ac	idress)	
(Ac	idress)	
(C)	ty/State/Zip/Phone	. #)
PICK-UP	☐ WAIT	MAIL
(Ви	ısiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



900008516849

10/24/02--01043--007 **78.75

O2 OCT 24 AM IO: 50
SECRETARY OF STATE
AMASSEE FLORIDA



TRANSMITTAL LETTER

Department of State Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

October 22, 2002

SUBJECT: SABLE PROPERTIES, INC.

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check in the amount of \$78.75.

FROM:

Smitty Smith & Associates, Inc.

Ms. Smitty Smith

3802 Ehrlich Road, Suite 210

Tampa, Florida 33624

SLS/lac

Enclosure

ARTICLES OF INCORPORATION

OF

SABLE PROPERTIES, INC.



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

ARTICLE I NAME

The name of the corporation shall be:

SABLE PROPERTIES, INC.

ARTICLE II PRINCIPAL OFFICE

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

520 FLAMINGO DRIVE APOLLO BEACH, FLORIDA 33572

ARTICLE III CAPITAL STOCK

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

1,000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Ms. Smitty Smith 3802 Ehrlich Road, Suite 210 Tampa, FL 33624

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

GEOFFREY HOLDERMILLER 520 FLAMINGO DRIVE APOLLO BEACH, FLORIDA 33572

The undersigned has (have) executed these Articles of Incorporation this TWENTY-SECOND day of OCTOBER, 2002.

Signature

GEOFFREY HOLDERMILLER

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statues, 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:

SABLE PROPERTIES, INC.

2. The name and address of the registered agent and office is:

MS. SMITTY SMITH 3802 EHRLICH ROAD, SUITE 210 TAMPA, FLORIDA 33624

GEOFFREY HOLDERMILLER

PRESIDENT

Date: 10/22/02

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATE CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THE 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

Date: 10/22/02

REGISTERED AGENT FILING FEE: \$35.00