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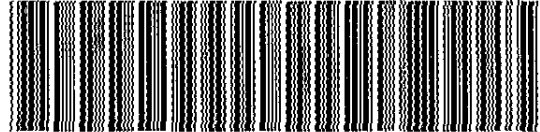
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RECEIVED
03 AUG 14 PM 1:02
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ATTORNEYS' TITLE

Requestor's Name

1965 Capital Circle NE, Suite A

Address

Tallahassee, Fl 32308

City/St/Zip

850-222-2785

Phone #

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

- 1- SOUTH SHORE PROPERTY MANAGEMENT, INC.
- 2-
- 3-
- 4-

☒ Walk-in

☐ Pick-up time ASAP

☐ Certified Copy

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

ARTICLES OF INCORPORATION
OF
SOUTH SHORE PROPERTY MANAGEMENT, INC.

FILED
03 AUG 14 PM 1:55
SECRETARY OF STATE
TALLAHASSEE FLORIDA

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be: South Shore Property Management, Inc.
The principal place of business of this corporation shall be 595 N. Nova Road, Suite 205, Ormond Beach, FL 32174, and the mailing address of business shall be 595 N. Nova Road, Suite 205, Ormond Beach, FL 32174.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in 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 maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 7,500 shares of common stock having \$1 par value per share.

ARTICLE IV. ADDRESS

The street address of the initial registered office of the corporation shall be 595 N. Nova Road, Suite 205, Ormond Beach, Florida, 32174, and the name of the initial registered agent of the corporation at that address is Sheryl T. Faris.

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. PREEMPTIVE RIGHTS

Every shareholder upon the sale for cash of any new stock of this corporation of the same kind, class, or series as that which he already holds, shall have the right to purchase his pro rata share thereof at the price at which it is offered to others.

ARTICLE VII. SPECIAL PROVISION

The stock of this corporation is intended to qualify under the requirements of Section 1244 of the Internal Revenue Code and the regulations issued thereunder. Such actions as are necessary will be taken by the appropriate officers to accomplish this compliance.

ARTICLE VIII. OFFICERS

The name and address of the initial directors and officers of the corporation who shall hold office for the first year of the corporation, or until their successors are elected or appointed are:

Sheryl T. Faris
12 Remington Road
Ormond Beach, FL 32174

Director, President

Patricia A. Barker
1105 Overbrook Drive
Ormond Beach, FL 32174

Director, Secretary, Treasurer

ARTICLE IX. INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation are: Sheryl T. Faris, 12 Remington Road, Ormond Beach, FL 32174.

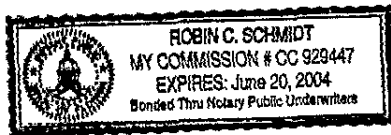
IN WITNESS WHEREOF, the undersigned incorporator has executed these
Articles of Incorporation on this 12 day of August, 2003.

Sheryl T. Faris
Sheryl T. Faris

STATE OF FLORIDA
COUNTY OF VOLUSIA

The foregoing instrument was acknowledged before me this 12 day of
July, 2003, by Sheryl T. Faris, who is personally known to me or who
produced the following identification: personally known.

Robin C. Schmidt
Notary Public
State of Florida at Large



Print name of Notary Public

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE
STATED CORPORATION, AT THE PLACE DESIGNATED HEREIN, 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.

Sheryl T. Faris
Sheryl T. Faris
Registered Agent

Dated: 8/12/03

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03 AUG 14 PM 1:55
SECRETARY OF STATE
TALLAHASSEE FLORIDA