

P03000112880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

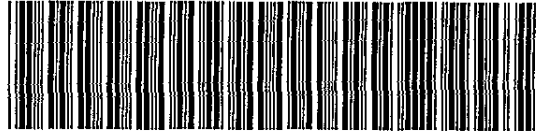
(Business Entity Name)

(Document Number)

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W03-23739

TRANSMITTAL LETTER

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

SUBJECT: KEMPTON SHERMAN HOWLAND, JR., P.A.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: KEMPTON SHERMAN HOWLAND, JR.

Name (Printed or typed)

355 FALLING WATERS DRIVE

Address

POINCIANA FL 34759-5220

City, State & Zip

863-427-3333/407-222-4847

Daytime Telephone number

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



Kemp Howland
REALTOR®

22 West Monument Street
Kissimmee, FL 34741
Direct (407) 222-4847
Residence (863) 427-1100
Business (407) 846-4040
Fax (407) 846-3407
Website www.kemphowland.com
E-mail kemp@kemphowland.com

October 10, 2003

Reference: Articles of Incorporation

Ms. Becky McKnight
Division of Corporations
P.O. Box 6327
Tallahassee Florida 32314

Dear Ms. McKnight:

Thank you for your assistance this morning.

Attached is the corrected form, which we discussed via telephone. I hope it is filled out properly.

Please let me know if there is anything I need to do to expedite this matter.

Again, thank you for your help.

Sincerely,

A handwritten signature in black ink, appearing to read "Kemp Howland", with a long horizontal flourish extending to the right.

Kemp Howland

Enclosure



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

August 20, 2003

KEMPTON SHERMAN HOWLAND JR
355 FALLING WATERS DRIVE
POINCIANA, FL 34759-5220

SUBJECT: KEMPTON SHERMAN HOWLAND, JR., P.A.
Ref. Number: W03000023739

We have received your document for KEMPTON SHERMAN HOWLAND, JR., P.A. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific nature of business of the professional association must be stated in the document.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6931.

Becky McKnight
Document Specialist
New Filings Section

Letter Number: 403A00047280

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:

KEMPTON SHERMAN HOWLAND, JR., P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

355 FALLING WATERS DRIVE, POINCIANA FL 34759-5220

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

- 1. TO TRANSACT ANY LAWFUL ACTIVITIES AS A LICENSED REAL ESTATE ASSOCIATE

ARTICLE IV SHARES

The number of shares of stock is:

THE AGGREGATE NUMBER OF SHARES WHICH THE CORPORATION IS AUTHORIZED TO ISSUE IS ONE HUNDRED (100). SUCH SHARES ARE TO CONSIST OF ONE CLASS OF STOCK ONLY AND ALL SUCH SHARES ARE WITH \$1.00 PAR VALUE.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

KEMPTON SHERMAN HOWLAND, JR.
355 FALLING WATERS DRIVE, POINCIANA FL 34759-5220
PRESIDENT/VICE PRESIDENT/SECRETARY/TREASURER

ARTICLE VI REGISTERED AGENT

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

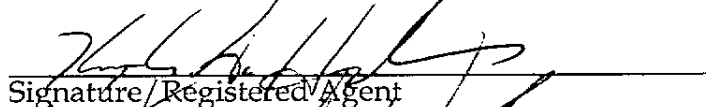
KEMPTON SHERMAN HOWLAND, JR.
355 FALLING WATERS DRIVE, POINCIANA FL 34759-5220

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

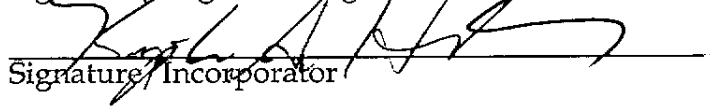
KEMPTON SHERMAN HOWLAND, JR.
355 FALLING WATERS DRIVE, POINCIANA FL 34759-5220

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

10-10-03
Date



Signature/ Incorporator

10-10-03
Date

FILED
03 OCT 13 PM 1:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA