

PO40000063056

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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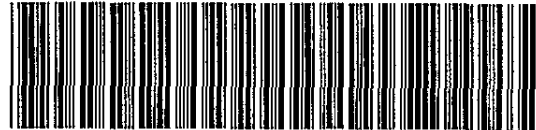
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2004 APR -9 PM 1:49
TALLAHASSEE FLORIDA

4/15/04

TRANSMITTAL LETTER

FILED

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

2004 APR -9 PM 1:49

DEPARTMENT OF STATE
TALLAHASSEE FLORIDA

SUBJECT: Community Association Partners, Incorporated
(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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Michael Mitchell
Name (Printed or typed)

826 A1A Beach Blvd. #41
Address

St Augustine Beach, FL 32080
City, State & Zip

904-471-9671
Daytime Telephone number

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

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:

Community Association Partners, Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

826 A1A Beach Boulevard, #41
Saint Augustine Beach, Florida 32080

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in any activity or business permitted under the laws of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1000 shares of stock

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Michael John Mitchell, Director, President
826 A1A Beach Boulevard, #41
Saint Augustine Beach, Florida 32080

ARTICLE VI REGISTERED AGENT

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

Michael John Mitchell
826 A1A Beach Boulevard, #41
Saint Augustine Beach, Florida 32080

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael John Mitchell
826 A1A Beach Boulevard, #41
Saint Augustine Beach, Florida 32080

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

3/13/04

Date



Signature/Incorporator

3/13/04

Date

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SECRETARY OF STATE
TALLAHASSEE FLORIDA