

PO5000002111

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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05/09-5 PM 1:31  
STATE  
FLORIDA

**Is**

## TRANSMITTAL LETTER

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

SUBJECT: HERITAGE INDUSTRIES, CORP.  
(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: DOUGLAS A. McLEAN  
Name (Printed or typed)

300 CIRCLE PARK DRIVE  
Address

SEBRING, FLA. 33870  
City, State & Zip

863-385-8850  
Daytime Telephone number

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

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05 JUN -5 PM 1:31  
DEPT. OF STATE  
TALLAHASSEE, FLORIDA

# 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:

HERITAGE INDUSTRIES, CORP.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

105 DOLL DRIVE  
WINTER HAVEN, FLA. 33884

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

RENTAL OF RESIDENTIAL PROPERTIES

## ARTICLE IV SHARES

The number of shares of stock is:

5000 SHARES @ \$1 PAR

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JASON H. BERKOWITZ - PRESIDENT AND SOLE DIRECTOR  
105 DOLL DRIVE  
WINTER HAVEN, FLA. 33884

## ARTICLE VI REGISTERED AGENT

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

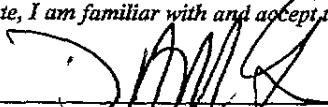
DOUGLAS A. McLEAN  
300 CIRCLE PARK DRIVE  
SEBRING, FLA. 33870

## ARTICLE VII INCORPORATOR

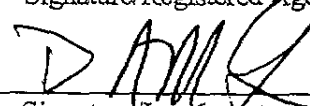
The name and address of the Incorporator is:

DOUGLAS A. McLEAN  
300 CIRCLE PARK DRIVE  
SEBRING, FLA. 33870

\*\*\*\*\*  
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

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

  
\_\_\_\_\_  
Date

FILED

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CLERK OF STATE  
TALLAHASSEE, FLORIDA