

P05000146155

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

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

SUBJECT: North Florida Real Estate Investors Association  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) INC.

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: Arlene Cal  
Name (Printed or typed)

267 Laird Dr  
Address

Freeport FL 32439  
City, State & Zip

(850) 286-7651  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

October 21, 2005

ARLENE CAL  
267 LAIRD DR.  
FREEPORT, FL 32439

SUBJECT: NORTH FLORIDA REAL ESTATE INVESTORS ASSOCIATION,  
INC.  
Ref. Number: W05000048138

We have received your document for NORTH FLORIDA REAL ESTATE INVESTORS ASSOCIATION, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

In article III you said your purpose is non profit. You have filled out profit articles.

The articles of incorporation of a nonprofit corporation must be prepared in compliance with section 617.0202, Florida Statutes. Please refer to that section of the law for assistance.

We are enclosing the proper form(s) with instructions for your convenience.

An effective date may be added to the Articles of Incorporation if a 2006 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

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) 245-6047.

Carolyn Lewis  
Document Specialist  
New Filings Section

Letter Number: 005A00064107

**COVER LETTER**

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

SUBJECT: NORTH FLORIDA REAL ESTATE INVESTORS ASSOCIATION INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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☒ \$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: ARLENE CAL  
Name (Printed or typed)

267 LAIRD DR  
Address

FREEPORT, FL, 32439  
City, State & Zip

(850) 236-7651  
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:

NORTH FLORIDA REAL ESTATE INVESTORS ASSOCIATION INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

267 LAIRD DR. FREEPORT, FL., 32439

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE CORPORATION MAY ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE STATE OF FLORIDA

## ARTICLE IV SHARES

The number of shares of stock is:

1000 COMMON SHARES PAR VALUE \$10.00

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ARLENE CAL - PRESIDENT - 267 LAIRD DR. FREEPORT, FL., 32439

## ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

ARLENE CAL - 267 LAIRD DR. FREEPORT, FL., 32439

## ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

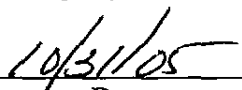
ARLENE CAL - 267 LAIRD DR. FREEPORT, FL., 32439


\*\*\*\*\*

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

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

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Date