

PO6000145925

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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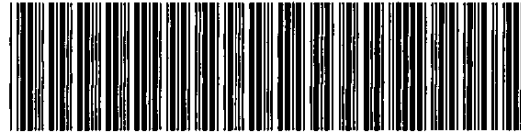
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11-21-06
2006

COVER LETTER

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

SUBJECT: LEGACY PROPERTY MANAGEMENT, INC.
(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: ERLINDA P. VIRAY
Name (Printed or typed)

348 FERN LAKE DRIVE
Address

ORLANDO, FL 32825
City, State & Zip

407-382-1097
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:

LEGACY PROPERTY MANAGEMENT, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

348 FERN LAKE DRIVE, ORLANDO, FL 32825

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MANAGE REAL ESTATE

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ERLINDA P. VIRAY - 348 FERN LAKE DRIVE, ORLANDO, FL 32825
PRESIDENT

JULIAN P. VIRAY - 342 FERN LAKE DRIVE, ORLANDO, FL 32825
VICE PRESIDENT

ARTICLE VI REGISTERED AGENT

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

ERLINDA P. VIRAY
348 FERN LAKE DRIVE
ORLANDO, FL 32825

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ERLINDA P. VIRAY
348 FERN LAKE DRIVE
ORLANDO, FL 32825

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

Erlinda P. Viray
Signature/Registered Agent

11/16/06

Date

Erlinda P. Viray
Signature/Incorporator

11/16/06

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA