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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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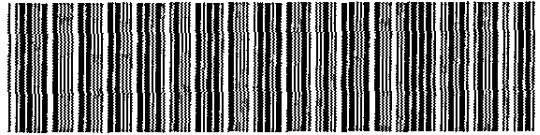
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Rd

## COVER LETTER

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

SUBJECT: northwest florida r.v. properties,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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: sharon andrassi  
Name (Printed or typed)

6856 martin rd.  
Address

milton,fla 32570  
City, State & Zip

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:

NORTHWEST FLORIDA R.V. PROPERTIES, INC

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6856 MARTIN RD.  
MILTON, FLA 32570

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

R.V. CAMPGROUND PROPERTIES

## ARTICLE IV SHARES

The number of shares of stock is:

100%

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

SHARON ANDRASSI 6856 MARTIN RD.  
MILTON, FLA 32570

## ARTICLE VI REGISTERED AGENT

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

SHARON ANDRASSI  
6856 MARTIN RD.  
MILTON, FLA 32570

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SHARON ANDRASSI  
6856 MARTIN RD.  
MILTON, FLA 32570

\*\*\*\*\*

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

Sharon L. Andrassi

Signature/Registered Agent

SHARON ANDRASSI

Signature/Incorporator

1/9/07

Date

1/9/07

Date

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07 JAN 16 AM 11:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

COPY