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SECRETARY OF SIAIL
DIVISION OF CORPORATIONS
OR HIM I.S. PM 2: L2

EP 6/17/68

## **COVER LETTER**

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

SUBJECT: Tri - County Proposed CORPORA	erty Mana	igement, Inc		
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
\$70.00 \$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: Lori WADDICK

Name (Printed or typed)

5645 Johnson Lake ROAD

Address

Deleon Springs, FL. 32130

City, State & Zip

386 985 6368

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: Tri-County Property Management, Frc.	
ARTICLE II PRINCIPAL OFFICE  The principal street address and mailing address, if different is:  5645 Johnson Lake Rono, Deleon Springs, Fl. 32130	
The purpose for which the corporation is organized is:  To have a professional Corporation  To manage Condo + HOA	
ARTICLE IV SHARES The number of shares of stock is:	SECRETARY DIVISION OF CO
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):  Loci Wappick Pre	OF CORPORATIONS
Jeff WADDICK Sec/TREA  ARTICLE VI REGISTERED AGENT	10k5
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:  Lori Wassick 5245 Johnson Lake Road, DeLeon Springs, Fl. 32130	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
Lori Waldonick 5645 Johnson Lake Road, Deleon Springs, Fl. 32130	
**************************************	**********  designated in this  /
Signature/Registered Agent    Date	<u>58</u>
Signature/Incorporator Date	<u>Y</u>