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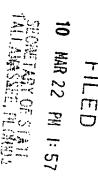
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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COVER LETTER

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

SUBJECT: The His	storic Murphey House, Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	l 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 o Status
		ADDITIONAL COPY REQUIRED	
	trick Kirchman Nam Abbott Street	e (Printed or typed)	
42		Address	
St.	Augustine, FL 32084 City,	State & Zip	
(35	2) 666-6519		
	Daytime 7	elephone number	
thel	nistoricmurpheyhouse@yahoo.co		
-	E-mail address: (to be use	d for future annual report	notification)

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:

The Historic Murphey House, Inc.

PRINCIPAL OFFICE ARTICLE II

The principal street address and mailing address, if different is: 42 Abbott Street, St Augustine, FL 32084 13330 Candia Street, Spring Hill, FL 34609 (mailing)

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: Short term vacation rental

ARTICLE IV SHARES

The number of shares of stock is: 2 (two)

INITIAL OFFICERS AND/OR DIRECTORS

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

Patrick Kirchman 13330 Candia St Spring Hill FL CEO 34609 Gina Panepinto 13330 Candia St Spring Hill COO FL 34609

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Gina Panepinto 13330 Candia St, Spring Hill FL 34609

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: Patrick Kirchman 13330 Candia St, Spring Hill FL 34609

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
Patrick Kirchman

Signature/Incorporator

March 17, 2010

Date

March 17, 2010

Date

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