# P10000053342

(Requestor's Name)	
(Address)	
(Address)	
. (City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of S	tatus
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

es of incorporation and	a check for:
<b>\$78.75</b>	\$87.50
Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL CO	PY REQUIRED
	Filing Fee

: Michael Manning
Name (Printed or typed)
PO Box 50665
Address
Sarasota, FL 34232-0305
City, State & Zip
941-359-4876
Daytime Telephone number
•
mike@prmi.net
E-mail address: (to be used 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:

Alpha Community Rentals, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 1877 Northgate Boulevard, Suite 4, Sarasota, FL, 34234 (street) PO Box 50665, Sarasota, FL 34232-0305 (mailing)

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Rental real estate management

## ARTICLE IV SHARES

The number of shares of stock is: 1,000

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Michael Manning 627 Fontana Ln Bradenton FL Timothy J. Nye 10821 N. Militaru Tr #14, Palm FL

34209 33410 President VP/Sec/Treas

#### ARTICLE VI REGISTERED AGENT

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

Michael Manning

1877 Northgate Boulevard, Suite 4

Sarasota, FL 34234

## ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Michael Manning

1877 Northgate Boulevard, suite 4

Sarasota, FL 34234

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

Gardens

 Michael / Venue
 L-21-1010

 Signature/Registered Agent
 Date

 Wic heal Mann
 6-21-1010

 Signature/Incorporator
 Date