

P10000057976

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 JUL 14 PM 12:00

APPROVED
AND
FILED

PS 7/16/10

COVER LETTER

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

SUBJECT: _____

COUNTYWIDE HOMES 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: _____

GAYLE M. DIXON
Name (Printed or typed)

4590 ORCHID DR
Address

TEQUESTA FL 33469
City, State & Zip

561-932-1020
Daytime Telephone number

LANDJUP@aol.com
E-mail address: (to be used for future annual report notification)

LANDJUP@aol.com

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:

COUNTYWIDE HOMES INC

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

784 U.S. Hwy 1, Suite #1
North Palm Beach, FL 33408

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Re - Hab family homes

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

STEVEN C. UDRE, PRES
130 STILLWATER CIR.
JUPITER, FL 33458

ARTICLE VI REGISTERED AGENT

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

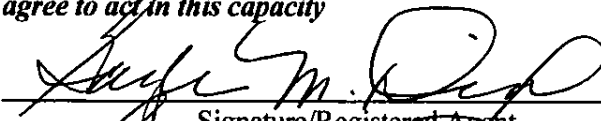
GAYLE M. DIXON
4590 ORCHID DR.
TEQUESTA, FL 33469

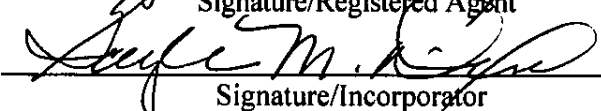
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

GAYLE M. DIXON
4590 ORCHID DR.
TEQUESTA, FL 33469

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


Signature/Incorporator

7-13-10

Date
7-13-10

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 JUL 14 PM 12:00

APPROVED
AND
FILED