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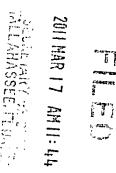
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| PICK-UP WAIT MAIL | | | | |
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| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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COVER LETTER

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

SUBJECT: American Homes of Northeast Florida, 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 \$78.75 \$78.75 \$87.50 Filing Fee Filing Fee JFiling Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: Brian Mullen Name (Printed or typed) 29 Collington Ct. Address Palm Coast, FL City, State & Zip 334-546-0414 Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

bmullen2008@yahoo.com
E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

| ARTICLE I The name of the co | NAME American Homes of North orporation shall be: | east Florida, Inc. | |
|------------------------------|---|---------------------------------------|--|
| ARTICLE II | PRINCIPAL OFFICE | | |
| AKTICLEH | Principal street address | Mailing a | address, if different is: |
| : | 29 Collington Ct. | | SAME |
| | alm Coast, Florida 32137 | | |
| | | | |
| ARTICLE III | | | |
| The purpose for w | which the corporation is organized is: | | |
| Construction | business to include general business. | | |
| ARTICLE IV | | | |
| The number of sna | res of stock is: 100 shares | | |
| | INITIAL OFFICERS AND/OR DIRECTORS | | |
| | itle:Brian C. Mullen (President, VP & Sec.) | | |
| Address: | 29 Collington Ct. Palm Coast, FL 32137 | Address: | |
| | Palm Coast, FL 32137 | | |
| N 17 | | | |
| Name and 1 Address: | itle: | | |
| Addiess. | | | |
| | | | |
| Name and T | itle: | Jame and Title: | |
| Address: | | | |
| | | | |
| | | | |
| ARTICLE VI | REGISTERED AGENT | | 2011 |
| | orida street address (P.O. Box NOT acceptable) of the | registered agent is: | 3. · · · · · · · · · · · · · · · · · · · |
| Name: | Brian C. Mullen | | E E TI |
| Address: | 29 Collington Ct | | CO. |
| | Palm Coast, Fl. 32137 | | 7 |
| ARTICLE VII | INCORPORATOR | | |
| | iress of the Incorporator is: | | C - Secretary |
| Name: | Brian C. Mullen | | |
| Address: | 29 Collington Ct. | | - - |
| | Palm Coast, FL. 32137 | | |
| | ed as registered agent to accept service of process fo m familiar with and accept the appointment as registe | | |
| Buan | C Mullen/ | | 3-1-2011 |
| | Required Signature/Registered Agent | | Date |
| | ment and affirm that the facts stated herein are tru epartment of State constitutes a third degree felony as | | |
| R - | CM. 11. 1 | | 0.4.55.4 |
| (our | Paguired Signature (Incompression | · · · · · · · · · · · · · · · · · · · | 3-1-2011 |
| | Required Signature/Incorporator | | Date |