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COVER LETTER

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

SUBJECT: Sandcastle Association Management Inc (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the art	icles of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy Certificate of Status ADDITIONAL COPY REQUIRED
FROM: Mary Baisden Name	e (Printed or typed)
4442 Omaha Dr	Address
Pensacola, FL 32507	State & Zip
(850) 221-8341 Daytime T	Celephone number
<u>sandcastleami@gmail.c</u> E-mail address: (to be use	com / 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 Sandcastle Associa	ation Management Inc	
The name of the	corporation shall be:		
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing add	lress, if different is:
	4442 Omaha Dr		
	Pensacola, FL 32507		
ARTICLE III	DIIDDOCE		
	which the corporation is organized is:		
The purpose for	Which the corporation is organized is:		
Community	Association Management		
ARTICLE IV	SHARES		
The number of sl	nares of stock is: One Hundred (100) st	nares at 1.00 per share	
4 D/5/10/ D 1/		amono.	
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTION DICE		
Address:	Title: PCEO Mary Baisden	Address:	
Addiess.	4442 Omaha Dr		
	Pensacola, FL 32507		
	•		
	Title:		
Address:		Address:	
	Title:	Name and Title:	
Address:		Address:	
			<u> </u>
			Ero -
	REGISTERED AGENT	11.5 61 1.1	
Name:	Iorida street address (P.O. Box NOT accepta		APR
Address:	Mary Baisden 4442 Omaha Dr		
Addicss.	Pensacola FL 32507		\$\$₹ 6 0 }≥
	FERSAULIA, LL JZJUZ		1 P P
ARTICLE VII	INCORPORATOR		50
The name and a	ddress of the Incorporator is:		· · · · · · · · · · · · · · · · · · ·
Name:	_Mary_Baisden		B. 12
Address:	4442 Omaha Dr.		~
	Pensacola, FL 32507		
Having been na	med as registered agent to accept service of	process for the above stated corpor	ation at the place designated in
	am familiar with and accept the appointment		
11	· · · · · ·	0 0	
Vlan	itaison)		4.8.11
	Required Signature/Registered Age	nt	Date
	9		
	cument and affirm that the facts stated here		
aocument to the	Department of State constitutes a third degre	e jeiony as provided for in s.817.155), F.S.
115	P. 10		110.11
_X/\au	Transler)		7.0.11
· ,	Required Signature/Incorporator	•	Date