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COVER LETTER

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

SUBJECT: Tropical Investments of Lee County, 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 Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: Gregory William Shepard Name (Printed or typed) 2243 Widman Way Address

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

City, State & Zip

Daytime Telephone number

Fort Myers, Florida 33901

239 332 3939

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 12, 2011

GREGORY WILLIAM SHEPARD 2243 WIDMAN WAY FORT MYERS, FL 33901

SUBJECT: TROPICAL INVESTMENTS OF LEE COUNTY

Ref. Number: W11000046903

We have received your document for TROPICAL INVESTMENTS OF LEE COUNTY, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State.

The fees for profit and nonprofit, domestic or foreign are as follows:

Filings Fees: \$35.00
Registered Agent
Designation \$35.00
Certified Copy \$8.75
Certificate of Status \$8.75

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 711A00021046

ARTICLES OF INCORPORATION

	In compliance with Chapter 607	and/or Chapter 621, F.S. (Profit)	֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	ED 16837 (
The name of the	NAME Tropical Investments corporation shall be:	of Lee County, コハに・	٠ ٠ ٠٠١١٤ ١	
			2.11 SEP 23	PM 6: 5
ARTICLE II	PRINCIPAL OFFICE Principal street address	Mailing address if di		4. 0
	2243 Widman way	Mailing address, if di	Herent is:	
	Fort Myers, FL 33901			
ARTICLE III				
	which the corporation is organized is: al Corporation			
ARTICLE IV	SHARES nares of stock is:100			
	INITIAL OFFICERS AND/OR DIRECT	ORS		
Name and	Title: Gregory Shepard, President	Name and Title:	<u></u>	
Address:	2243 Widman Way			
	Fort Myers, Florida 33901			
Name and	Title	Name and Titles		
Address:	Title:	Address:		
Name and	Title:	Name and Title:		
Address:				
ARTICLE VI	REGISTERED AGENT			
	lorida street address (P.O. Box NOT acceptable) of the registered agent is:		
Name:	Gregory Shepard	<u> </u>		
Address:	2243 Widman Way			
	Fort Myers, Florida 33901			
	INCORPORATOR			
The <u>name and ac</u> Name:	ddress of the Incorporator is:			
Address:	Gregory Shepard 2243 Widman Way			
	Fort Myers, Florida 33901			
Having been nar this certificate, I	ned as registered agent to accept service of production familiar with and accept the appointment as i	cess for the above stated corporation at ti registered agent and agree to act in this ca	he place designated in pacity	n
./		1.	N 8- 00	
	2 10		x 05 501	
	Required Signature/Registered Agent		Date	
I submit this dog	ument and affirm that the facts stated herein of Department of State constitutes a third degree fel	are true. I am aware that the false infor	mation submitted in a	a
document to the	Pepartment of State constitutes a third degree fel	lony as provided for in s.817.155, F.S.		
,		0	100 000	

Required Signature/Incorporator