

P13000011965

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

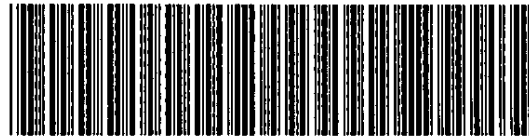
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 FEB -4 PM 12:10

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MRB
2/6/13

COVER LETTER

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

SUBJECT: NHM REAL ESTATE INVESTMENTS, 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
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: **KIM BOWERS**
Name (Printed or typed)
211 E MAIN STREET, STE. 100
Address
LAKELAND, FL 33801
City, State & Zip
800-430-7999
Daytime Telephone number
KIM.BOWERS@MIDAMERICA.BIZ
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: NHM REAL ESTATE INVESTMENTS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

211 E. MAIN STREET

STE. 100

LAKELAND, FL 33801

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

REAL ESTATE INVESTMENT

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ROBERT J. GEORGES, PRESIDENT

Name and Title: _____

Address 211 E MAIN STREET
STE. 100
LAKELAND, FL 33801

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

(cont.)

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Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: KIM BOWERS
Address: 211 E. MAIN STREET, STE. 100
LAKELAND, FL 33801

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: CPS GROUP, CPAs PA
Address: 1509 S. FLORIDA AVE
LAKELAND, FL 33803

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

Kim Bowers

Required Signature/Registered Agent

1/24/13

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

[Signature]

Required Signature/Incorporator

1-18-13

Date