

P130000066450

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only

2544-  
W13000042812



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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 AUG -8 PM 2:33

8/13/13  
JG

## COVER LETTER

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

**SUBJECT: Leeward Land 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: Suzanne Lemmons

Name (Printed or typed)

4124 Orchid Drive

Address

Hernando Beach, FL 34607

City, State & Zip

352-639-1040

Daytime Telephone number

suzanne@leewardland.com

E-mail address: (to be used for future annual report notification)

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



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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 31, 2013

SUZANNE LEMMONS  
4124 ORCHID DRIVE  
HERNANDO BEACH, FL 34607

SUBJECT: LEEWARD PROPERTIES INC.  
Ref. Number: W13000042812

We have received your document for LEEWARD PROPERTIES INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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) 245-6052.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 713A00018459

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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLE I NAME**

The name of the corporation shall be: **Leeward Land Homes, Inc.**

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**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

**4124 Orchid Drive**

**Hernando Beach, FL 34607**

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: **any lawful purpose related to residential property.**

**ARTICLE IV SHARES**

The number of shares of stock is: **1,000**

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: **Terry Lemmons, President**

Name and Title: **Suzanne Lemmons, Vice President**

Address: **4124 Orchid Drive**

Address: **4124 Orchid Drive**

**Hernando Beach, FL 34607**

**Hernando Beach, FL 34607**

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

(cont.)

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

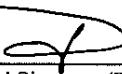
Name: Terry Lemmons  
Address: 4124 Orchid Drive  
Hernando Beach, FL 34607

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

Name: Suzanne Lemmons  
Address: 4124 Orchid Drive  
Hernando Beach, FL 34607

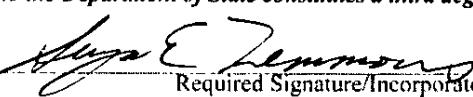
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Required Signature/Registered Agent

08/06/2013

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.*

  
\_\_\_\_\_  
Required Signature/Incorporator

08/06/2013

Date

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DIVISION OF CORPORATIONS