

P13000075204

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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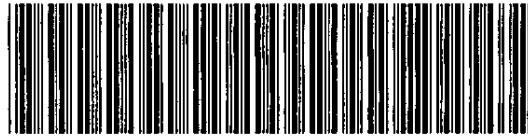
(Business Entity Name)

(Document Number)

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

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13 SEP 10 AM 10:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Ps 9/13/13

## COVER LETTER

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

SUBJECT: Royal Oaks Management, 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: Bonnie Chafin c/o RHA/Housing, Inc.

Name (Printed or typed)

3060 Peachtree Road, N.W., Suite 900

Address

Atlanta, GA 30305

City, State & Zip

(404) 968-2660

Daytime Telephone number

bchafin@rhanet.org

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:

Royal Oaks Management, Inc.

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**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

3060 Peachtree Road, N.W.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Suite 900

Atlanta, GA 30305

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any lawful purpose or purposes.

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

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

Name and Title: Bryant G. Coats, CEO, Director

Name and Title: Charles W. Northcutt, III, Secretary

Address: 3060 Peachtree Road, NW

Address: 100 Camellia Drive

Suite 900

Dothan, AL 36303

Atlanta, GA 30305

Name and Title: Chase Northcutt, President, Director

Name and Title:

Address: 3060 Peachtree Road, NW

Address:

Suite 900

Atlanta, GA 30305

Name and Title: John R. West, CFO, Director

Name and Title:

Address: 3060 Peachtree Road, NW

Address:

Suite 900

Atlanta, GA 30305

(cont.)

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Name and Title: \_\_\_\_\_ Name and Title: 13 SEP 10 AM 10:47  
Address: \_\_\_\_\_ Address: 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:

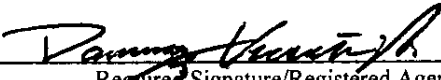
Name: CT Corporation System  
Address: 1200 South Pine Island Road  
Plantation, FL 33324

**ARTICLE VII INCORPORATOR**

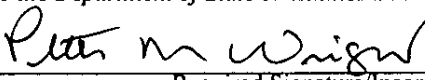
The **name and address** of the Incorporator is:

Name: Peter M. Wright, Esq.  
Address: 3060 Peachtree Road, NW, S900  
Atlanta, GA 30305

*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*

 8/30/13  
Required Signature/Registered Agent Date  
Danny Verdecchia, Jr. Asst. Secretary

*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.*

 08/29/2013  
Required Signature/Incorporator Date