P 4000 1 502

| (F | Requestor's Name) | | | |
|---|-------------------|--------|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | Certificates of | Status | | |
| Special Instructions to Filing Officer: | | | | |
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COVER LETTER

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

COCOHATCHEE DEVELOPMENT, INC.

| Enclosed are an o | riginal and one (1) copy of the art | icles of incorporation an | d a check for: | | |
|-------------------------|-------------------------------------|--|-------------------------|--|--|
| ጃ \$70.00 Filing Fee | , , | \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | & Certificate of Status | | |
| FROM: | Michele C. Walker | | | | |
| | Name | e (Printed or typed) | | | |
| 3 | 400 E. Lafayette | | | | |
| | Address | | | | |
| . г | Detroit, Michigan 48207 | | | | |
| _ | City, State & Zip | | | | |
| 3 | 13-567-0125, ext. 235 | | | | |
| _ | Daytime T | elephone number | · | | |
| n | nichele.walker@soave.com | | | | |
| _ | E-mail address: (to be use | 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)

| Principal street address | Mailing address, if different is: | Mailing address, if different is: | |
|--|--|-----------------------------------|------------------|
| E. Lafayette | | | |
| oit, Michigan 48207 | | | |
| · | | | |
| TICLE III PURPOSE purpose for which the corporation is organize | ed is: | | |
| | | neti | |
| | | <u>-</u> | 12 |
| | ſ | ン ン | (A) |
| | _ | N X | '2 ? : ''11 : |
| | r | <u>?</u> | 199 S. |
| | | <u>,,,</u> | |
| TICLE IV SHARES number of shares of stock is: TICLE V INITIAL OFFICERS AND | | , | |
| TICLE V INITIAL OFFICERS AND | | | |
| TICLE V INITIAL OFFICERS AND Name and Title: | OR DIRECTORS | | |
| TICLE V INITIAL OFFICERS AND Name and Title: | /OR DIRECTORS Name and Title: | | |
| TICLE V INITIAL OFFICERS AND Name and Title: | /OR DIRECTORS Name and Title: | | |
| Name and Title: Address | /OR DIRECTORS Name and Title: | | |
| Name and Title: Name and Title: | /OR DIRECTORS Name and Title: Address: | - | |
| Name and Title: Name and Title: | Name and Title: Name and Title: Name and Title: Name and Title: Address: Address: | - | |
| Name and Title: Name and Title: Address Address | Name and Title: Address: Name and Title: Address: | - | |
| Name and Title: Address Name and Title: Address | Name and Title: Address: Name and Title: Address: | | |
| Name and Title: Address Name and Title: Address Name and Title: | Name and Title: | | |

| Name an | d Title: | Name and Title: | |
|---|---|---|-----------------------|
| Address | | Address: | |
| | | | |
| The name and Fl | <u>REGISTERED AGENT</u> orida street address (P.O. Box NOT acceptable) of t | ha registered exent is: | 11 |
| Name: | C T Corporation System | ne registered agent is. | |
| Address: | 1200 South Pine Island Road | | S |
| | Plantation, FL 33324 | | Programme Company |
| ARTICLE VII | INCORPORATOR | | 55 g |
| The name and ad | dress of the Incorporator is: | | · |
| Name: | Michele C. Walker | | |
| Address: | 3400 E. Lafayette | | |
| | Detroit, Michigan 48207 | | |
| Having been nan this certificate, I d By: | ned as registered agent to accept service of process from familiar with and accept the appointment as registed. T Corporation System Ass | for the above stated corporation at the stered agent and agree to act in this confectal Barth | capacity |
| | Required Signature/Registered Agent | | Date |
| I submit this doc document to the I | ument and affirm that the facts stated herein are tr Department of State constitutes a third degree felony | ue. I am aware that the false informas provided for in s.817.155, F.S. | nation submitted in a |
| m | ichele C. Walker | | 8/22/14 |
| ~ N | Required Signature/Incorporator Tichele C. Walker | | Date |