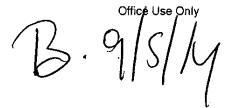
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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 21, 2014

CORPORATE ACCESS

SUBJECT: LONDON BAY COMMUNITY INVESTMENTS, LLC

Ref. Number: M09000000049

We have received your document for LONDON BAY COMMUNITY INVESTMENTS, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Theres no provision in the law that allows a foreign IIc to file a statement of authority.

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) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 114A00003919

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CORPORATE

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

		PICE	K UP: 9/3 Glinda	
٠	хх	CERTIFIED COPY		
		РНОТОСОРУ		
	ХХ	CUS	GS	
	хх	FILING	Articles	
1.		Robert A. Bauman, P.A.		
		(CORPORATE NAME AND DOCU	JMENT #)	
2.		AGODDOD ATTENANT AND DOOR	YANGAME (I)	
		(CORPORATE NAME AND DOCU	JMENI#)	
3.		(CORPORATE NAME AND DOCU	IMFNT #)	
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4.				
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		(CORPORATE NAME AND DOCU	JMENT #)	
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		(CORPORATE NAME AND DOCU	JMENT #)	
SP	ECIA	L INSTRUCTIONS:		

COVER LETTER

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

may, P.A.	
TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
cles of incorporation and	d a check for:
□ \$78.75	참 \$87.50
Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL CO	
(Printed or typed) (Printed or typed) (A) Way ddress 33624 State & Zip 8/0 lephone number O Uahno Co for fujure annual report i	
	Sauman (Printed or typed) Bayer (Pall Way Address 33624 State & Zip

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)

RTICLE I N	oration shall be:					
TICLE II P	RINCIPAL OFFI				te atee A fac	
2/0/ :	Principal <u>street</u>	=	0	_	ess, if different is:	
		Way	<u> </u>	U. 130X	21623	
AMPA;	FL 33	3624	7,	ampa, 1	CL 3362	2-162
RTICLE III Pl	TRPOSE th the corporation i	is organized is:/	law gracti	c <i>E</i>		
						
						
			· · · · · · · · · · · · · · · · · · ·			
TICLE IV S	HARES of stock is:	10				
number of shares	of stock is:					
number of shares	of stock is:		ectors	's / T		
number of shares	of stock is:/ WITIAL OFFICE: itle: Robert	rs and/or dir - (-) . Baym	ECTORS PD	S / T		
number of shares	of stock is:/ WITIAL OFFICE: itle: Robert	rs and/or dir - (-) . Baym	ECTORS PD Name and T	'S / T 'itle:		
number of shares TTCLE V II Name and T	of stock is:/ NITIAL OFFICE: itle: Robert P. O. Bo;	rs and/or dir A. Baum x 21623	Address:	'S / T 		
number of shares TCLE V II Name and T	of stock is:/ NITIAL OFFICE: itle: Robert P. O. Bo;	rs and/or dir A. Baum x 21623	ECTORS P/D/ Name and T Address:	S/T		
number of shares TCLE V II Name and T	of stock is:/ NITIAL OFFICE: itle: Robert P. O. Bo;	rs and/or dir A. Baum x 21623	Address:	'S /T 'itle:		
number of shares TICLE V II Name and T Address	of stock is: NITIAL OFFICE itle: Robert P. O. Bo; Tampa;	rs and/or dir A. Baum x 21623	Address:			
Name and Ti	of stock is: NITIAL OFFICE itle: Robert P. O. Boy Tampa	RS AND/OR DIR A. BAUM X 21623 , FL 336	Address: ZZ - 6 Z 3			
number of shares TICLE V II Name and T Address	of stock is: NITIAL OFFICE itle: Robert P. O. Boy Tampa	rs and/or dir A. Baum x 21623	Address: ZZ - 6 Z 3			
Name and Ti	of stock is: NITIAL OFFICE itle: Robert P. O. Boy Tampa	RS AND/OR DIR A. BAUM X 21623 , FL 336	Address: ZZ - 6 Z 3			
number of shares TTCLE V II Name and T Address Name and Ti	of stock is: NITIAL OFFICE itle: Robert P. O. Boy Tampa	RS AND/OR DIR A. BAUM X 21623 , FL 336	Address: ZZ - 6 Z 3		·	
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Name and Ti Address Name and Ti Address	of stock is:	RS AND/OR DIR	Address:	itle:	-	SEP-4 PH
Name and T Address Name and Ti Address	of stock is:	RS AND/OR DIR	Address:	itle:	-	MASEP-4

Name and Title:	Name and Title:
Address	Address:
-	
ARTICLE VI REGISTERED AGENT	·
The name and Florida street address (P.O. Box NOT a	
Name: Robert A. BAUM	<u>NAN</u>
Address: 13601 WATERTAL	11 Way SEP
TAMOR, FC 336	Z4 /
	
ARTICLE VII INCORPORATOR	PH 12:
The name and address of the Incorporator is:	
Name: Robert A- BAC	WMAN (
Address: 6.0. Box 2162.	<i>3</i>
Address: P.O. Box 2162. TAMPA, FL 3:	3622-1623
Having been named as registered agent to accept servi-	ice of process for the above stated corporation at the place designated in intment as registered agent and agree to act in this capacity
	a / 2 / 1/
Required Signatury Registere	
	-
I submit this document and affirm that the facts stated document to the Department of State constitutes of the	d herein are true. I am aware that the false information submitted in a degree felony as provided for in s.817.155. F.S.
(als) MI	c la lui
Required Signature/Incorpo	orator Date
Signatura incorpi	· y