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: (850)617-6381

From:

Account Name : GM FINANCIAL GROUP

Account Number : I19980000102 Phone : (954)428-8899

Fax Number : (954)428-6699

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: rankine\_lisa@yahoo.com

## , FLORIDA PROFIT/NON PROFIT CORPORATION WATER LILLY MANOR, INC.

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

	tion shall be: WATER LILLY MANOR, I		
ARTICLE II PRINC	CIPAL OFFICE Principal street address	Mailing add	dress, if different is:
4161 NW 26TH ST #3	12		
LAUDERHILL, FL 33	313		
	OSE the corporation is organized is:	O ALL LEGAL BUSINESS	
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ARTICLE IV SHAR	<u>ES</u> 1000 Fstock is:		<del>1</del> 2
		<del></del>	Pri
	AL OFFICERS AND/OR DIRECTORS		F 3
Name and Titl	FITZROY BARNETT, P	Name and Title:	
Address	4161 NW 26TH ST #312		
Address	LAUDERHILL, FL 33313	Address:	
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Name and Title	:	Name and Title:	
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Address		Address:	

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Apr 22 19, 03:43p Paradise Villa

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,	Address	Address:	
ARTICI E	EVI REGISTERED AGENT		
The name	and Florida street address (P.O. Box NO)	[ accentable) of the registered agent in	
Name	FITZROY BARNETT	agent by	
Name	4144 2000 000 000 000	<del></del>	
Address:	4161 NW 26TH ST #312		
	LAUDERHILL, FL 33313		
A DTTCI E	YTI_INCORPORATOR		
	<del></del>		
The name	and address of the Incorporator is:		
Namo:	FITZROY BARNETT		
	4161 NW 26TH ST #312		
Addre	\$8:	<del></del>	
	LAUDERHILL, FL 33313		
		<del></del>	ı
ARTICLE	VIII BEFECTIVE DATE:		
Effective d	late, if other than the date of filing-	(OPTIONAL)	
(If an effer	ctive date is listed, the date must be speci	fle and cannot be more than five days prior or 98 days	after the
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the docum	ent's effective date on the Department of St	ate's records.	
Harden ha			
this cartific	A can familiar with and occupy the ambo	rice of process for the above stated corporation at the place intracest as registered agent and agree to act in this capaci	e designated in
		AND THE CONTRACT OF THE CONTRACT OF STATE OF STATE CONTRACTOR	,
-XII	Jarry Gal		12/19
~~~	Required Signature/Register		Liz.
I (subject) ch	is document and affirm that the facts state	ed herein are true. I am aware that the folse information	Submitted in a
OCCUPANT O	one Department of State Constitutes a thir	d degree felony as provided for in £817.155, P.S.	
JAHY .	meth X/	4/7	b /19
₩	Required Signature/Interrporator		<u>/ </u>