P24000068929

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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2024 NOV -8 AM 10:54
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

MS

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 11/08/2024

WALK IN

ENTITY NAME CLDG Management II, Inc.

DOCUMENT NUMBER

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TALLAHASSEE, FL

PLEASE FILE THE ATTACHED AND RETURN

XXXXXXXXX Plain Copy

Certified Copy

Certificate of Status

PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY

Certified Copy of Arts & Amendments

Certified Copy of Arts & Amendments Complete File (Including Annual Reports)

Certificate of Status

Certificate of Status Reflecting:

APOSTILLE' / NOTARIAL CERTIFICATION

COUNTRY OF DESTINATION

NUMBER OF CERTIFICATES REQUESTED

TOTAL OWED $ 70.00

ACCOUNT # I20160000072

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

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

SUBJECT: CLDG Management II, 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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FROM: Justin Higgins
Name (Printed or typed)

1000 Riverside Avenue, Suite 600
Address

Jacksonville, Florida 32204
City, State & Zip

904-383-9525
Daytime Telephone number

Jhiggins@cornerlotdevelopmeat.com
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: CLDG Management II, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1000 Riverside Avenue, Suite 600
Jacksonville, Florida 32204

Mailing address, if different is:
1000 Riverside Avenue, Suite 600
Jacksonville, Florida 32204

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Management Services for real estate.

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ARTICLE IV SHARES
The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Christian Allen, President
Address 1000 Riverside Avenue
Suite 600
Jacksonville, Florida 32204

Name and Title: George Leone, Vice President & Secretary
Address: 1000 Riverside Avenue
Suite 600
Jacksonville, Florida 32204

Name and Title:
Address

Name and Title:
Address:

Name and Title:
Address

Name and Title:
Address:

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: Justin Higgins

Address: 1000 Riverside Avenue, Suite 600

Jacksonville, Florida 32204

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TALLAHASSEE, FL

ARTICLE VII INCORPORATOR

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

Name: Christian Allen

Address: 1000 Riverside Avenue, Suite 600

Jacksonville, Florida 32204

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

11/7/2024
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

Date 11/7/2024