

Attorney At Law

(107) 628-280

FAX 628-105.

Attorneys' Title Insurance Fund  
660 E. Jefferson Street  
Suite 200  
Tallahassee, Fl 32301  
Attn: Regina Williams

[illegible]

1. The original signed Articles of Incorporation;
2. A copy of the Articles of Incorporation;
3. A check in the amount of \$122.50 made payable to the Secretary of State; and
4. A check in the amount of \$10.00 made payable to Attorneys' Title Insurance Fund.

Filing Fee	35.00
Certified Copy	52.50
Registered Agent Designation	35.00

Sincerely,

Al A. Cheneler

2/11/25

ARTICLES OF INCORPORATION  
OF  
REAL ESTATE RENOVATION & RECOVERY CO.

FILED  
55 FEB 14 PM 3:21  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, do hereby adopt the following Articles of Incorporation:

ARTICLE I  
NAME

The name of the corporation is:

REAL ESTATE RENOVATION & RECOVERY CO.

The principal place of business of this corporation shall be  
2168 Marquette Avenue, Sanford, Fl 32773.

ARTICLE II  
DURATION

The duration of the corporation is perpetual.

ARTICLE III  
NATURE OF BUSINESS

This corporation may engage in or transact any of all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE IV  
CAPITAL STOCK

The aggregate number of shares which the corporation is authorized to issue is 7,500 shares of common stock. Such shares shall be of a single class and shall have a par value of \$1.00 per share.

ARTICLE V  
INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the corporation is 2168 Marquette Avenue, Sanford, Fl 32773, and the name of its initial registered agent is Marsha O. Melvin.

ARTICLE VI  
INITIAL BOARD OF DIRECTORS

The number of directors constituting the initial board of directors is one. The number of directors may be increased or decreased from time to time in accordance with the Bylaws but shall never be less than one (1). The name and address of the initial director of the corporation are as follows:

Marsha O. Melvin

2168 Marquette Avenue  
Sanford, Fl 32773

ARTICLE VII  
INCORPORATORS

The name and address of each incorporator is as follows:

Al A. Cheneler, Esquire  
611 Wymore Road, Suite 202  
Winter Park, Florida 32789

#### ARTICLE VIII

##### OFFICERS

The name and address of the initial officer of the corporation who shall hold office for the first year of the corporation, or until their successors are elected or appointed are:

Marsha O. Melvin - President/Secretary/Treasurer  
2168 Marquette Avenue  
Sanford, Fl 32773

#### ARTICLE IX

##### INDEMNIFICATION

The corporation shall indemnify any officer or director or any former officer or director, to the full extent permitted by law.

#### ARTICLE X

##### BYLAWS

The power to adopt, alter, amend or repeal Bylaws shall be vested in the board of directors of this corporation.

#### ARTICLE XI

##### AMENDMENT OF ARTICLES OF INCORPORATION

These Articles of Incorporation may be amended at any time by

a resolution adopted by a majority vote of the board of directors at any annual or special meeting, provided at least ten (10) days written notice is given to each director of the time and place of the meeting and the purpose thereof. Any amendment to the Articles of Incorporation so made must be approved by a majority vote of the shareholders of the corporation.

IN WITNESS WHEREOF, the undersigned have signed these Articles of Incorporation on this 8<sup>th</sup> day of February, 1995.

Al A. Choneler, Esquire  
611 Wymore Road, Suite 202  
Winter Park, Florida 32789

STATE OF FLORIDA  
COUNTY OF ORANGE

Before me personally appeared AL A. CHENELE, to me well known and known to me to be the person described in and who executed the foregoing Articles of Incorporation and acknowledged to and before me that he executed said instrument for the purpose therein expressed.

WITNESS my hand and official seal this 8<sup>th</sup> day of February, 1995.

Cynthia Phillips  
Notary Public, State of Florida  
My Commission Expires: May 27, 1995  
My Commission Expires May 27, 1995  
Bonded Three Troy Fair - Insurance Inc.

DESIGNATION OF REGISTERED AGENT

Marsha O. Melvin, desiring to organize under the laws of the State of Florida, with its principal office as indicated in the

Articles of Incorporation, at Sanford, Florida, had and done by  
these presents name Marsha O. Melvin as its agent to accept service  
of process within this State.

ACCEPTANCE OF DESIGNATION OF REGISTERED AGENT

Having been named to accept service of process of the above  
named corporation, at the place designated in this certificate, I  
hereby accept to act in this capacity, and agree to comply with the  
provisions of said act relating to keeping open said office.

DATED this 8<sup>th</sup> day of February, 1995.

Marsha O. Melvin

Marsha O. Melvin  
Registered Agent

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

DIVISION OF CORPORATIONS

FILED

96 DEC 30 AM 11:41

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # P95000012296

1. Corporation Name

REAL ESTATE RENOVATION & RECOVERY CO.

Principal Place of Business

2168 MARQUETTE AVENUE  
SANFORD FL 32773

Mailing Address

2168 MARQUETTE AVENUE  
SANFORD FL 32773

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable

3. New Mailing Office Address, if Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
to Do Business in Florida

02/14/1995

5. FEI Number

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required  
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officer and/or Director	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PSTD	MELVIN, MARSHA O	2168 MARQUETTE AVENUE	SANFORD FL 32773

300002046153--6  
-01/03/97--01183--025  
\*\*\*\*383.75 \*\*\*\*383.75

8. Name and Address of Current Registered Agent

MELVIN, MARSHA O  
2168 MARQUETTE AVENUE  
SANFORD FL 32773

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of  
Registered Agent

Marsha O. Melvin

REGISTERED AGENT MUST SIGN

Date 12/27/96

11. Does this corporation pay any intangible tax to the  
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information  
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Marsha O. Melvin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARSHA O. MELVIN

Date

Daytime Phone

12/27/96 407-328-1257