P95 0000 30396

Secretary of State Division of Corporations P. O. Box 6327 Talahassee, Florida 32314

RE: MAHOGANY HOMES, INC.

COCHOED 1 47 . C.CHBC) -04/13/95--01070---016 -8449122.50 - 8984122.50

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy Of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

JAMES E. MATHEWS

MAHOGNAY HOMES, INC. 2255 PAULDO STREET FORT MYERS, FLORIDA 33916

(813) 337-7520 (813) 334-4099 W95-8216

ARTICLES OF INCORPORATION

nſ

MAHOGANY HOMES, INC.				
(name	of corporation)			
The undersigned subscriber(s) to these Articles of Incorporation under the laws of the State of Florida.	poration, natural person(s) competent to o	contract,	hereby l	form a
ARTICLE 1 -	CORPORATE NAME		55	-:()
The name of the corporation is:			APR	2
MAHOGANY HOMES, INC.			~ ::3	17.
ARTICLE	II - DURATION			200
This corporation shall exist perpetually unless dissolve	ed according to Florida law,		N	1350 1350
	III - PURPOSE		07	
The corporation is organized for the purpose of engagin United States and the State of Florida.		under ti	he laws	्री of the
The corporation is authorized to issue EIGHTEEN HU				
Dollar(s) (\$_1.00) par value Commo	on Stock, which shall be designated "Co	ommon	Shares."	
ARTICLE V - INITIAL REC	GISTERED OFFICE AND AGENT			
The street address of the Initial Registered Agent office		Agent at	that off	irr is
NAME JAMES E MATHEWS				
ADDRESS 2255 PAULDO STREET				
CITY FORT MYERS,	FLORIDA FLORIDA	710	33916	·~··
The principal office, if known, or the mailing adress of			00310	
NAME MAHOGANY HOMES, INC.	<u></u>			
ADDRESS 2255 PAULDO STREET				
CTTY FORT MYERS				
TONI TILAS	FLORIDA FLORIDA L BOARD OF DIRECTORS	Zili	33916	
This corporation shall have SIX (6) increased or diminished from time to time by the By-L addresses of the initial director(s) of the corporation a) directors initially. The number of di	rectors r	may be e names	ither and
NAME STANVILLE FASTMOND P/D				•
ADDRESS 309 MONROE AVE			7.2	
CITY LEHIGH ACRES:	STATE FLORIDA	ZIP	33936	
NAME JAMES E MATHEWS C/D				
ADDRESS 2255 PAULDO STREET	***************************************		 -	
CTTY FORT MYERS	STATE FLORIDA	ZIP	33916	_
NAME ERICKA B COUSLEY S/T		<u> </u>		
ADDRESS 201 DOUGLAS AVE, N.				.
TTY LEHIGH ACRES	STATE FLORIDA	+3144	33971	"
CODM 216. A POTECT DO A TOTAL		ZIP SEMINOI		01262

ARTICLE VII - INCORPORATORS

/he nan	nes and addresses of the	incorporators	ssigning	these .	Articles of	Incorpor	ation arc	as follows	•
	NSTON CUNNINGHAM	VP/D							
A'DDRESS	503 WILLOW DRIVE								
CITY	LEHIGH ACRES				STATE	LORIDA	A	710	33936
NAME EL	MER JOHNSON	D				····			
ADDRESS	3033 THOMAS STREET	<u> </u>							
CTIY	FORT MYERS				SIATE	LORIDA	1	ZIP	33916
NAME ME	RVAN THOMPSON	VC/D	***********	•	<u> </u>	***	24		
	1958 KNIGHT STREET								
спү	FORT MYERS				STATE F	LORIDA		710	33916
day of _	IESS WHEREOF, the und	ersigned subso	criber(s)	have ex	ecuted thes	e Article	s of Incorp	oration th	is
				<u>-</u>				-	(Sca
									(Sea
									40
					-				(Sea
STATE O	F FLORIDA								
	-)	SS					
	OF)						
before me,	, a Notary Public authoriz	ed to take ack	knowledg	ments	in the State	and Cou	inty set for	th above,	personally
).	1 0								
X Wh	ustra (/		Dia	*12 5 =		1		
167	Signature				185 = N = 0	Form of I	dentification		
XXXX				- 00	RSONA	<i>.</i>	/< w.o.s	فيدد	
	Signature					Form of I	dentification		
2 Um	w/ John S	· ·		120	RSONAL	-ر	ENIW	\sim	
known to m	Signature					Form of le	dentification		
	e and known to be the persor executed thes on_as indicated opposite						ntion, who a ofidenti	cknowleds fication of	ged before the above
	OFFICIAL NOTABLE STATE SEAL OFFICIAL NOTABLE SEAL CLIFFORD L WOODLIFF	1	Witness this	my hand	d and official day of	scal in th	ne County ar	id State last	aforesaid
	CONTROL STATE DIJBUY TAAL	•	00	Bol	w or	for	1	19.	***************************************
<u> </u>	Y COMMISSION EXP. JUNE 13,	1998	Notary Sign	. ==	A E D	450	rop4. F	r:	 ,
			Printed Notas	ry Signatur					

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

0F

MAHOGANY HO	MES, INC	,
-------------	----------	---

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 2255 PAULDO STREET

FORT MYERS FLORIDA 33916

has named JAMES E MATHEWS

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(registered agent)

95 MR 13 PH 2: U

SECRETARY OF STATE