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

SUBJECT:	The Scither	n Cross orporate name	- must include suffix)	Inc.

Enclo for :	sed is an original \$70.00 Filing Fee	l and one (1) co [] \$78.75 Filing Fee & Certificate	py of the articles o [] \$122.50 Filing Fee & Certified Copy Additional Cop	Filing Fee, Certified Copy & Certificate	ind a check
	FROM:	Lors - Namo	Hemminger (printed or typed)		J
		<u>9838 Ok</u>	1. Prymerckw!	SRd Sude	-1 <i>8</i> 6
		<u>Jacksony</u>	ty, State & Zip	9 <u>2</u> %	
			L- 729 GROO		

 \mathcal{A} NOTE: Please provide the original and one copy of the articles.

CHANGE CHANGE

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be.

The Southern Cross Gardens, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

9838 Old Baymrackers RJ, Suite 188 Jacksonville, FL

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

10,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Lois Burch Hemminger 9838 Old Bay meadows Rd, Suite #188 Docksonville, FL 32256

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are).

Lois Burch Hemminger 9838 Old Baymendows Rd. Suite #188 Jacksonville, FL 3.2254

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

aday of August, 1995.	
Signature Signature	-
Signature	-
Signature	-

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE (1974) AND AGENT/REGISTERED (1974) AND AGE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is: The Southern Cress Gardens, he
2.	The name and address of the registered agent and office is:
	Lois Burch Hemminger
	9838 Od Bay meadows - Pd Suite #188 (P.O. Box or Mail Drop Box NOT ACCEPTABLE)
	Licksonville, FL 32256

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

SIGNATURE) 2 Clucut 95 (DATE)