

P950000068952

WILMA CARRILLO
ATTORNEY AT LAW
1701 SOUTH FLORIDA AVENUE
LAKELAND, FLORIDA 33803

POST OFFICE BOX 7097
LAKELAND, FLORIDA 33807-7097

TELEPHONE: (813) 683-9314
FAX: (813) 683-5917

August 31, 1995

Department of State
Division of Corporations
Corporate Records Bureau
Post Office Box 6327
Tallahassee, Florida 32301

400001577494
-09/05/95--01083--019
*****70.00 *****70.00

Re: Capital Housing Finance, Inc.

Dear Sir/Madam:

Enclosed is an original and one copy of Articles of Incorporation for the above-named corporation. In addition, a check in the sum of \$70.00 is enclosed which represents the following fees:

Filing Fee	\$35.00
Registered agent fee	\$35.00

Please file the original of the enclosed Articles of Incorporation and return a copy to the undersigned.

Sincerely yours,



Terri L. Woodbery
Legal Assistant to Wilma Carrillo

AL SEP - 7 1995

FILED
STATE
DIVISION OF
CORPORATIONS
SEP - 5 PM 1:38

/tlw

enclosures

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 SEP -5 PM 1:38

ARTICLES OF INCORPORATION
OF
CAPITAL HOUSING FINANCE, INC.

The undersigned incorporator, being of full age, does hereby make and file these Articles of Incorporation under the provisions of the Florida General Corporation Act for the purpose of becoming a corporation and does hereby accept all the rights, privileges and obligations conferred and imposed by the Laws of The State of Florida.

ARTICLE I - NAME

The name of this corporation is CAPITAL HOUSING FINANCE, INC., with its principal address at Post Office Box 90653, Lakeland, Florida 33804.

ARTICLE II - DURATION

This corporation shall have perpetual existence unless voluntarily dissolved according to law.

ARTICLE III - PURPOSE

This corporation is organized for the purposes of transacting any and all lawful business permitted under the Florida General Corporation Act.

ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue 100 shares of ONE (\$1.00) DOLLAR par value common stock which shall be designated "Common Shares".

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is 2310 Lakeland Hills Blvd., Lakeland, Florida 33805, and the name of the initial registered agent of this corporation at that address is Ellis Wayne Jenkins.

ARTICLE VI - PREEMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro-rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VII - BYLAWS

The power to adopt, alter, amend or repeal bylaws shall be vested in the Board of Directors.

ARTICLE VIII - INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) director initially. The number of directors may be either increased or decreased from time to time by the bylaws but shall never be less than one (1) or more than four (4). The name and address of the initial director of this corporation is:

NAME

ELLIS WAYNE JENKINS

ADDRESS

Post Office Box 90653
Lakeland, Florida 33804

ARTICLE IX - INCORPORATOR

The name and address of the person signing these Articles is:

NAME

ELLIS WAYNE JENKINS

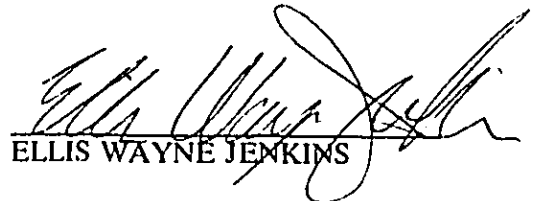
ADDRESS

Post Office Box 90653
Lakeland, Florida 33804

ARTICLE X - AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto and any right conferred upon the shareholders is subject to this reservation.

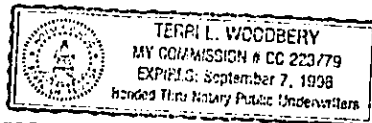
IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this 18 day of AUGUST, 1995.


ELLIS WAYNE JENKINS

STATE OF FLORIDA
COUNTY OF POLK

The foregoing Articles of Incorporation was acknowledged before me this 18 day of AUGUST, 1995, by ELLIS WAYNE JENKINS, who is personally known to me and who did not take an oath.

Affix Notarial Seal



My Commission Expires


Notary Public

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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ACKNOWLEDGEMENT AND ACCEPTANCE

Having been named as the registered agent for the above corporation for the purpose of accepting service of process at the registered office designated in this certificate, I hereby accept such appointment and acknowledge that I am familiar with and accept the obligations and responsibilities of such office as provided for in Florida Statutes 607.0505.


ELLIS WAYNE JENKINS
Registered Agent

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

DOCUMENT # **P95000068952**

1 Corporation Name

CAPITAL HOUSING FINANCE, INC.

96 OCT - 7 PM 1:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

P.O. BOX 90653
LAKELAND FL 33804

Mailing Address

P.O. BOX 90653
LAKELAND FL 33804



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

09/05/1995

5 FEI Number

59-3343668

6012

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 Officers
and/or Directors

3 Street Address of Each
Officer and/or Director
(Do NOT Use Post Office Box Numbers)

4 City / State / Zip

D

JENKINS, ELLIS W

P.O. BOX 90653 N/A

LAKELAND FL 33804

200001979522--6

-10/18/96--01020--017

***383.75 ***383.75

REINSTATEMENT

96

P. Alan

10-7-96

8. Name and Address of Current Registered Agent

JENKINS, ELLIS W
2310 LAKELAND HILLS BLVD.
LAKELAND FL 33805

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

[Signature]
REGISTERED AGENT MUST SIGN

Date

10/2/96

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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/2/96

(941) 688-9934

CR2040 (7/96)