

P96000049552  
C. L. Communities

P.O. Box 369  
Bonita Springs, Florida 33959-0369

FILED

96 JUN 10 AM 10:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

June 5, 1996

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

300001857203  
-06/11/96--01007--012  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Dear Sir/Madam:

Enclosed are the completed Articles of Incorporation for C. L. Communities, Inc. and a check for the filing and registered agent fees.

The contact person will be Tamara Janitz and she may be reached at (941) 992-8833. The mailing address in which to send correspondence is:

C. L. Communities, Inc.  
P.O. Box 369  
Bonita Springs, Florida 33959-0369

Thank you for your time in this matter.

Sincerely,

*Tamara Janitz*  
Tamara Janitz

*Fred Davidson* GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT *RA address*  
DATE \_\_\_\_\_  
DOC. EXAM. *PT*

*PT 6/11/96*

# ARTICLES OF INCORPORATION

of

C. L. Communities, Inc.

(name of corporation)

**FILED**

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

96 JUN 10 AM 10:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLE I - CORPORATE NAME

The name of the corporation is:

C. L. Communities, Inc.

## ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

## ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in an, activities or business permitted under the laws of the United States and the State of Florida.

## ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue Five Hundred shares ( 500 ) of one Dollar(s) (\$ 1.00 ) par value Common Stock, which shall be designated "Common Shares."

## ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing address of the corporation is:

NAME	<u>C. L. Communities, Inc.</u>		
ADDRESS	<u>P.O. Box 369</u>		
CITY	<u>Bonita Springs,</u>	FLORIDA	<u>Florida</u> ZIP <u>33959-0369</u>

The name and street address of the Initial Registered Agent of this Corporation is:

NAME	<u>Gregory A. Erdman</u>		
ADDRESS	<u>3575 BONITA BEACH RD</u>		
CITY	<u>Bonita Springs</u>	FLORIDA	<u>Florida</u> ZIP <u>33959-0369</u>

## ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have two ( 2 ) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	<u>Charles J. Erdman, Jr.</u>		
ADDRESS	<u>P.O. Box 369</u>		
CITY	<u>Bonita Springs</u>	STATE	<u>Florida</u> ZIP <u>33959-0369</u>
NAME	<u>Gregory A. Erdman</u>		
ADDRESS	<u>P.O. Box 369</u>		
CITY	<u>Bonita Springs</u>	STATE	<u>Florida</u> ZIP <u>33959-0369</u>
NAME			
ADDRESS			
CITY		STATE	ZIP

# ARTICLE VII - INCORPORATORS

"The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	Charles J. Erdman, Jr		
ADDRESS	P.O. Box 369		
CITY	Bonita Springs	STATE	Florida ZIP 33959-0369
NAME	Gregory A. Erdman		
ADDRESS	P.O. Box 369		
CITY	Bonita Springs	STATE	Florida ZIP 33959-0369
NAME			
ADDRESS			
CITY		STATE	ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 29 day of May, 19 96.

Charles J. Erdman (Seal)  
Gregory A. Erdman (Seal)  
 \_\_\_\_\_ (Seal)

STATE OF FLORIDA

COUNTY OF Lee

SS

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared:

Charles J. Erdman  
 Signature  
Gregory A. Erdman  
 Signature

Personally known  
 Form of Identification

Personally known  
 Form of Identification

Signature

Form of Identification

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me that Charles/Gregory executed these Articles of Incorporation, that I relied upon the form X of identification of the above named person as indicated opposite each name, and that an oath (was)(was not) taken.

NOTARY RUBBER STAMP SEAL

Witness my hand and official seal in the County and State last aforesaid this 29 day of May, 19 96

Notary Signature

Christy Davidson CC463735  
 Printed Notary Signature

CERTIFICATE AND ACKNOWLEDGEMENT  
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

FILED

96 JUN 10 AM 10:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. L. Communities, 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 (3575 Bonita Beach Road)

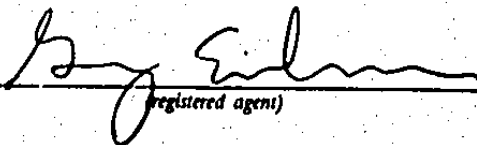
Bonita Springs, Florida 33959-0369

has named Gregory A. Erdman

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)