

P96000084760

Requestor's Name
Daniel A. Anderson

Address
4270 Aloma Ave., Suite 20C
Winter Park, FL 32792

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
96 OCT 14 AM 8:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CUSTOMER'S RECEIPT

DO NOT SEND THIS RECEIPT FOR PAYMENT
KEEP IT FOR YOUR RECORDS

65058400631 760923 327892 **70*00

SERIAL NUMBER	YEAR, MONTH, DAY	POST OFFICE	U.S. DOLLARS AND CENTS
PAY TO <i>Dept. of State</i> AUDIENCE <i>D.V. of Corp</i> <i>PO Box 6327</i>		CHECKWRITER IMPRINT AREA	
CODING OR USED FOR		FROM <i>Daniel Henderson</i> ADDRESS <i>3040 Algon Ave</i> <i>W.P. FL 32792</i>	

This receipt is your guarantee for a refund of your money order if it is lost or stolen, provided you file the Day, In and From information on the money order in the space provided. The claim for money payment permitted 2 years after payment. If your money order is lost or stolen, present this receipt and file a claim for a refund at your Post Office.

An Agency Form 8-031 may be filed at any time for a loss. A replacement will not be issued until 60 days after the money order purchase date, provided the money order has not been paid.

DATE 89/23/96 23-988848825-81 TIME 13:49

U.S. POSTAL SERVICE #1169188599
228 DRIGGS DR
WINTER PARK, FL 32793

TOTAL \$70.85

DEBIT SALE

ACCT. NUMBER

1817

EXP

1299

TRAN. #

333

CLERK ID

18

SYS. TRACE #

884378

AUTH

J503SD

WE DELIVER FOR YOU

TOP COPY : U.S. POSTAL SERVICE

BOTTOM COPY: CUSTOMER

FILED

96 OCT 14 AM 8:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

OF

FIVE STAR REAL ESTATE CORP.

The undersigned, for the purpose of forming a corporation under the laws of the State of Florida, do hereby adopt the following Articles of Incorporation: 4270 Aloma Ave., Suite 124-20C, Winter Park, FL 32792.

ARTICLE ONE (1)

NAME

The name of the corporation is **FIVE STAR REAL ESTATE CORP.**

ARTICLE TWO (2)

CORPORATE DURATION

The duration of the corporation is perpetual.

ARTICLE THREE (3)

PURPOSE OR PURPOSES

The general purposes for which the corporation is organized are:

1. To engage in the business of selling Real Estate to low income and first time buyers. While doing business with our customers they will be respectfully treated "with a Personal Touch".
2. To engage in any other trade or business which can, in the opinion of the Board of Directors of the corporation, be advantageously carried on in connection with or auxiliary to the foregoing business.
3. To do such other things as are incidental to the foregoing or necessary or desirable in order to accomplish the foregoing.

4. To do such other business as allowed and permitted under the laws of the State of Florida.

ARTICLE FOUR (4)

CAPITALIZATION

The aggregate number of shares which the corporation is authorized to issue is 1000. Such shares shall be of a single class, (Common Stock) and shall have a par value of One Dollar (\$1.00) per share.

ARTICLE FIVE (5)

REGISTERED OFFICE AND AGENT

The street address of the initial registered agent of the corporation is 4270 Aloma Avenue, Suite 124-20C, Winter Park, Florida 32792, and the name of the registered agent at such address, is DANIEL A. ANDERSON.

ARTICLE SIX (6)

DIRECTORS

The number of directors constituting the initial Board of Directors of the corporation is one (1). The name and address of each person who is to serve as a member of the initial Board of Directors is:

NAME	ADDRESS
DANIEL A. ANDERSON	4270 Aloma Avenue, Suite 124-20C, Winter Park, Florida 32792.

ARTICLE SEVEN (7)

INCORPORATORS

The name and address of the incorporator is:

NAME	ADDRESS
DANIEL A. ANDERSON	4270 Aloma Avenue, Suite 124-20C, Winter Park, Florida 32792.

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

FIVE STAR REAL ESTATE CORP.

Pursuant to Florida Statutes 48.091 and 607.0501, the following is submitted:

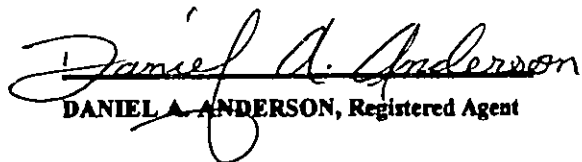
The above corporation, desiring to organize under the laws of the State of Florida with registered office as indicated in the Articles of Incorporation of **FIVE STAR REAL ESTATE CORP.** at:

4270 Aloma Avenue, Suite 124-20C, Winter Park, Florida 32792.

has named **DANIEL A. ANDERSON**, 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.


DANIEL A. ANDERSON, Registered Agent

FILED
96 OCT 14 AM 8:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EXECUTED BY the undersigned at Orlando, Florida on the 23 day of September 1996.

Daniel A. Anderson
DANIEL A. ANDERSON

STATE OF FLORIDA

COUNTY OF Orange

BEFORE ME, the undersigned authority, this day personally appeared, **DANIEL A. ANDERSON**, who, after being duly placed under oath, swore that the foregoing is true and correct and he subscribed his name hereto in certification thereof.

HE PRODUCED AS IDENTIFICATION THE FOLLOWING:

- a. He is personally known to me.
- b. Driver's License or Identification Card issued within the past five (5) years, FL# - - - - -.
- c. Other: _____