

9700003860

FROM:

Name of corporation: TRACY WINTERS LOG HOMES & SEALANTS, INC

Street address of the corporation P.O. Box 3245 Davis Lane

City Lake City State FL ZIP 32056

DEAR CORPORATIONS DIVISION:

Please find enclosed:

1. An original Articles of Incorporation and one copy for the above named corporation.
2. A certified check or money order in the amount of \$ 122.50 for filing fees.

A certified copy ☐ is ☒ is not requested.

If a certified copy is requested, the additional fee in the amount of \$ _____ is enclosed.

97 JAN 14 4:34
FILED
SECRETARY OF STATE
TALLAHASSEE FLORIDA

200002041452--8
-12/30/96--01082--018
****122.50 ****122.50

Please send responses or receipts concerning this filing to the above address.
Thank you very much.

12/23/96
Date

Tracy A. Winters
Signature of Incorporator

Tracy A. Winters
Name of Incorporator

904-752-7115
Telephone

1/14 097A-597
R.A. St. Add
610.
002-307



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

January 7, 1997

TRACY A. WINTERS
P.O. BOX 3245 DAVIS LANE
LAKE CITY, FL 32056

SUBJECT: TRACY WINTERS LOG HOMES & SEALANTS, INC.
Ref. Number: W9700000307

We have received your document for TRACY WINTERS LOG HOMES & SEALANTS, INC. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A post office box is not an acceptable address for the registered agent.

If you have any questions concerning the filing of your document, please call (904) 487-6934.

Loria Poole
Corporate Specialist

Letter Number: 097A00000597

ARTICLES OF INCORPORATION
of

TRACY WINTERS LOG HOMES & SEALANTS, INC

Pursuant to Chapter 607 of the Florida Business Corporation Act, the undersigned Incorporator ~~adopts~~ ^{adopts} these articles of Incorporation for the purpose of forming a for-profit corporation.

Article 1. The name of the Corporation is:

Tracy Winters Log Homes & Sealants, Inc

Article 2. The principal place of business and mailing address of this corporation is:

P. O. Box 3245 Davis Lane Lake City, FL 32056

Article 3. The corporation is authorized to issue one class of stock, that being 1000 shares of no par value, common stock, with identical rights and privileges, the transfer of which is restricted according to the bylaws of the corporation.

Article 4. The name and address of the corporation's initial registered agent is:

Tracy A Winters C/O Rt 14 Box 237E Lake City, FL 32024

Article 5. The name and street address of the Incorporator of this corporation is:

Tracy A. Winters P. O.Box 3245 Davis Lane Lake City, FL 32056

Article 6. No Director shall be held liable to the corporation or its shareholders for monetary damages due to a breach of fiduciary duty, unless the breach is a result of self-dealing, intentional misconduct, or illegal actions.

In witness whereof, the undersigned Incorporator has executed these Articles of Incorporation on the date below. The undersigned Incorporator hereby declares, under penalty of perjury, that the statements made in the forgoing Articles of Incorporation are true, and that the Incorporator is at least eighteen years of age.

1/10/97

Date

Tracy A. Winters
Signature of Incorporator

Tracy A. Winters

Name of Incorporator

FILED
JAN 14 PM 4:34
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TALLAHASSEE FLORIDA

**CERTIFICATE OF DESIGNATION
OF
REGISTERED OFFICE AND REGISTERED AGENT**

Pursuant to section 607.0501 of The Florida Business Corporation Act, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office and registered agent, in the State of Florida.

TRACY WINTERS LOG HOMES & SEALANTS, INC

1. The name and address of the corporation's registered agent and registered office is:

Tracy A. Winters
Name

C/O Rt 14 Box 237E
Street address

Lake City, Fl 32024
City/State/ZIP

Having been named as the 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.

Tracy A. Winters
Signature of registered agent

1/10/97
Date of signature

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SECRETARY OF STATE
TALLAHASSEE FLORIDA