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

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SUBJ	ECT: Saravi	sta Gardens, I	nc.		
	{ I	Proposed corporate	name - must include :	suffix)	
				•	
	sed is an original	and one (1) cop	by of the articles o	f incorporation a	nd a check
for:	☒ \$70.00	\$78.75	\$122.50	= \$131.25	
					FFFECTIVE DATE
					1-8-9-1
	FROM:	Morella &	Associates		
	,		e (printed or typed)		
					70 9 M
		Suite 100.	8150 Perry High	wav	
			Address		
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		Pittsburgh			MO I
		C	City, State & Zip		H 8: 42
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			9 - 9696		Pu.
		Daytin	ne Telephone number		
		JAN 2	2 4: 150))	

NOTE: Please provide the original and one copy of the articles.

LAW OFFICES OF MORELLA & ASSOCIATES SUITE 100 8150 PERRY HIGHWAY PITTSBURGH, PENNSYLVANIA 15237

JEFFREY J. MORELIA

JAMES F. CUNNINGHAM
ROBIN L. RARIE

TELEPHONE (412) 369-9696 TELECOPIER (412) 369-9990

January 7, 1997

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

Re: Saravista Gardens, Inc. (the "Corporation")

Dear Sir/Madam:

Enclosed please find an original and two copies of the Articles of Incorporation completed on behalf of the Corporation. Please note that the effective date of the Corporation is to be January 8, 1997. Should the enclosed be satisfactory, please date stamp one copy and return the same to me in the enclosed self-addressed envelope to acknowledge your receipt of the same.

I have also enclosed the Certificate of Designation of Registered Agent/ Registered Office for the Corporation as required. Finally, a check made payable to the Department of State in the amount of \$70.00 has been enclosed as payment of the required filing fees.

Thank you for your assistance in this matter. Should you have any questions, please do not hesitate to contact me.

Sincerely

nyey/ji. Morella

JJM/mie Enclosures

ARTICLES OF INCORPORATION

OF

Saravista Gardens.	Inc.		·····
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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

EFFECTIVE DATE

The name of the corporation shall be: Saravista Gardens, Inc.

Effective Date 1-8-97

ARTICLE II PRINCIPAL OFFICE

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

940 Boulevard of the Arts Sarasota, FL 34236

ARTICLE III SHARES

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

1,000 Shares of Common Voting Stock, no par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Ms. Diane Penn

940 Roulevard of the Arts

940 Boulevard of the Arts Sarasota, Florida 34242

ARTICLE V INCORPORATOR(S)

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

Jeffrey J. Morella, Esquire Morella & Associates Suite 100 8150 Perry Highway Pittburgh, PA 15237

The under	rsigned ir	ncorporator(s) has(have) execu	rted these Articles of Incorporation this
	7th	day of _January	, 19 <u>_97</u> .
		[fly]//m	elle
		Signature	
		Signature	
		Signature	

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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 n	ame of the corporation is: Saravista Gardens, Inc.
	,
2. The r	name and address of the registered agent and office is:
	Pro La Company
	Ms. Diane Penn
	(Name)
	940 Boulevard of the Arts
	(P.O. Box not acceptable)
	(F.O. box not acceptable)
	Sarasota, Florida 342
	(City/State/Zip)
Having above s the app to come mance as regis	been named as registered agent and to accept service of process for the stated corporation at the place designated in this certificate, I hereby accept ointment as registered agent and agree to act in this capacity. I further agree by with the provisions of all statutes relating to the proper and complete performs of my duties, and I am familiar with and accept the obligations of my position stered agent.
	(Signature)