De arte o cate Il sion or poratis O. Box 65 // allahassee, all. 3 // 3 // 3 // 4

ECT:	Cox Realty, Inc. (Proposed corporate name - must include suffix)					
	(Laspassa, and		0002109422 -03/11/9701024 ****131.25 *****1			
sed is an original a	nd one(1) copy of the article	s of incorporation and a	check for :			
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate			
		ADDITIONAL CO	PY REQUIRED			
FROM:	Martha Cox					
	Name (Printer	d or typed)				
	12009 N. Rome	Ave.	97 PALL			
	Address		MAR 10 1			
	Tampa, FL 33612		88. 10			
	City, State & Zip		PH 2:54			
	(012)022_2005	,	1913 1913 1913 1913 1913 1913 1913 1913			
******	(813)932-2905 Daytime Telepi	hone number				
		1 0 /11				

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

ARTICLES OF INCORPORATION

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

The name of the corporation shall be:

COX REALTY, INC.

ARTICLE II PRINCIPAL OFFICE

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

2803 W. Busch Blvd. Suite 208 Tampa, FL 33618



ARTICLE III SHARES

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

500 \$1.00 par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Martha Cox 12009 N. Rome Ave. Tampa, FL 33612-5181

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Martha Cox 12009 N. Rome Ave. Tampa, FL 33612-5181

Director, President, Secretary and Treasurer

i ne uno	iersigned in	corporator(s) nas(na	ive) executed these Afficies o	r incorporation this
1	_ day of _	March	, 19_97	
(An addi	itional articl	e must be added if	an effective date is requested.)
		math	alof	
			Signature	
	-	1 <u>12</u>	Signature	···
		**	Signature	

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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 name of the c	orporation is	COX REFIE	1, 1110.	
				· · · · · · · · · · · · · · · · · · ·
2. The name and add	ress of the registered ag	ent and office	is:	
	Martha Cox			TAL
		(NAME)		7711
	2803 W. Bus	sch Blvd.	Suite 208	IR I
	(P. O. Box or Ma	ail Drop Box N	OT ACCEPTABLE)	77 7
	Tampa, FL	33618		S 12.
		(City/State/Zi	P)	—— 5.5 · · · · · · · · · · · · · · · · · ·
at the place designat to act in this capacity	ed in this certificate, I h v. I further agree to con	ereby accept t nply with the p	the appointment as i provisions of all sta	e above stated corporation registered agent and agre tutes relating to the prope tobligations of my position
Mat	(SIGNATURE)		<u> </u>	-4-9~