## 79700009644

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

3000072342673

SARASOTA LAND LOMFA
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles 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 COPY REQUIRED

SARASOTA, FLORIDA, 34237
City, State & Zip

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

9N 11-12-97

## 97 NOV 10 PH 2: 4.1 SECRETARY OF STATE TALLARSSSEE, FLORIDA

## ARTICLES OF INCORPORATION

NAME

ARTICLE I

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

The name of the corporation shall be:  SARASOTA LAND COMPANY
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:  2765 HIDDEN LAKE BLUD.
SARASOTA, FLORIDA, 34237
ARTICLE III SHARES  The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
10,000 SLARES
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:  EDWARD LAKE BLUD.  2765 HIDDEN LAKE BLUD.
2965 HIDDEN KARE ZALLAS
ARTICLE V INCORPORATOR SARASOTA, FLORINA, 3423
The name and address of the incorporator to these Articles of Incorporation are:
TAURARA L ASSIA
2765 HIDDEN LAKE BLUD. SARASOTA, FLORIDA, 34237
SARASOIA, PAURIUM, STOOT
Eslu and L. Chesis November 5 1499
Signature/Incorporator Date

(An additional article must be added if an effective date is requested.)

Having been named as 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.

Signature/Registered Agent

Date /