

State of North Carolina  
Department of the Secretary of State

ARTICLES OF INCORPORATION  
NONPROFIT CORPORATION

Pursuant to §55A-2-02 of the General Statutes of North Carolina, the undersigned corporation does hereby submit these Articles of Incorporation for the purpose of forming a nonprofit corporation.

1. The name of the nonprofit corporation is: Autry Lake at Gates Four Townhome Association, Inc.

2.  (Check only if applicable.) The corporation is a charitable or religious corporation as defined in NCGS §55A-1-40(4).

3. The name of the initial registered agent is: Robert J. Williams V

4. The street address and county of the initial registered agent's office of the corporation is:

Number and Street: 2709 Thorngrove Court, Suite 1

City: Fayetteville State: NC Zip Code: 28303 County: Cumberland

The mailing address *if different from the street address* of the initial registered agent's office is:

Number and Street or PO Box: \_\_\_\_\_

City: \_\_\_\_\_ State: NC Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

5. The name and address of each incorporator is as follows:

Name	Address
<u>L. Holden Reaves, Esq.</u>	<u>916-A Arsenal Ave, Fayetteville, NC 28305</u>
_____	_____
_____	_____

6. (Check either "a" or "b" below.)

a.  The corporation will have members.

b.  The corporation will not have members.

7. Attached are provisions regarding the distribution of the corporation's assets upon its dissolution.

8. Any other provisions which the corporation elects to include are attached.

9. The street address and county of the principal office of the corporation is:

Principal Office Telephone Number: (910) 864-1125

Number and Street: 2709 Thorngrove Court, Suite 1

City: Fayetteville State: NC Zip Code: 28303 County: Cumberland

The mailing address *if different from the street address* of the principal office is:

Number and Street or PO Box: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

10. **(Optional):** Listing of Officers (See instructions for why this is important)

Name	Address	Title

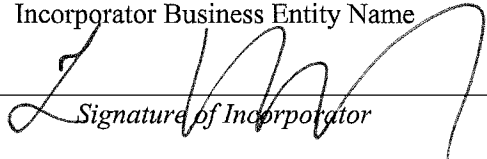
11. **(Optional):** Please provide a business e-mail address: \_\_\_\_\_.

The Secretary of State's Office will e-mail the business automatically at the address provided at no charge when a document is filed. The e-mail provided will not be viewable on the website. For more information on why this service is being offered, please see the instructions for this document.

12. These articles will be effective upon filing, unless a future time and/or date is specified: \_\_\_\_\_

This is the 5 day of January, 2021.

Autry Lake at Gates Four Townhome Association, Inc.

Incorporator Business Entity Name  
By:   
*Signature of Incorporator*

L. Holden Reaves, Esq., Incorporator  
*Type or print Incorporator's name and title, if any*

NOTES:

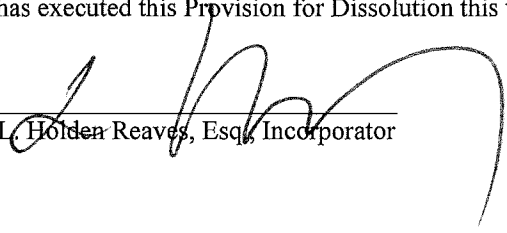
1. Filing fee is \$60. This document must be filed with the Secretary of State.

**Attachment to  
Articles of Incorporation of  
Autry Lake at Gates Four Townhome Association, Inc.**

Provision for Dissolution

Upon dissolution of the corporation, other than incident to a merger or consolidation, after all liabilities and obligations of the corporation have been paid, or adequate provision made therefore, then (a) assets held upon special condition shall be disposed of in accordance therewith; and (b) other assets shall be distributed in accordance with the corporation's plan of distribution pursuant to Section 55A-14-03 of the North Carolina General Statutes.

IN WITNESS WHEREOF, the Incorporator has executed this Provision for Dissolution this the 5th day of January, 2021.

  
\_\_\_\_\_  
L. Holden Reaves, Esq., Incorporator