Form 202 (Revised 05/11)

Submit in duplicate to: Secretary of State P.O. Box 13697 Austin, TX 78711-3697 512 463-5555 FAX: 512/463-5709

Filing Fee: \$25

Certificate of Formation

This space reserved for office use.

FILED
In the Office of the
Secretary of State of Texas
JAN 3 0 2013

Corporations Section

Nonprofit Corporation

Article 1 – Entity Name and Type

A	rucie I – Enui	y Name and Type			
The filing entity being formed is a n	onprofit corpor	ation. The name of the	entity is:		
El Dorado Property Owners Associa	ation, Inc.				
		gent and Registered O elete either A or B and complet			
A. The initial registered agent i	s an organizatio	on (cannot be entity named about	ove) by the	name of:	
OR B. The initial registered agent is an individual resident of the state whose name is set forth below:					
Daniel	M.	Schmeling			
First Name	M.I.	Last Name		Suffix	
C. The business address of the registered agent and the registered office address is:					
510 W. El Dorado Drive	Scroggins		TX	75480	
Street Address	City		State	Zip Code	

Article 3 - Management

The management of the affairs of the corporation is vested in the board of directors. The number of directors constituting the initial board of directors and the names and addresses of the persons who are to serve as directors until the first annual meeting of members or until their successors are elected and qualified are as follows:

A minimum of three directors is required.

Director 1					
Daniel	M.	Schmeling			
First Name	M.I.	Last Name			Suffix
510 W. El Dorado Drive	Scrogg	ins	TX	75480	U.S.A.
Street or Mailing Address	City		State	Zip Code	Country

Director 2					
Michael	J.	Simms			
First Name	M.I.	Last Name			Suffix
319 E. El Dorado Drive	Scroggir	ns	TX	75480	U.S
Street or Mailing Address	City		State	Zip Code	Сог
Director 3					
Helen	M.	Jungemann			
First Name	M.I.	Last Name			Suffix
526 W. El Dorado Drive	Scroggir	าร	TX	75480	U
OR The management of the aff members.	City		State	Zip Code the nonprofit	
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Su	pplemental Provisions/Info (See instructions.)	ormation			
Text Area: [The attached addendum, if any, is	incorporated herein by reference.]				
	Organizer				
The name and address of the organ	izer:				
Daniel M. Schmeling					
Name					
Post Office Box 103	Scroggins	TX	75480		
Street or Mailing Address	City	State	Zip Code		
Effec	ctiveness of Filing (Select either	er A, B, or C.)			
A. This document becomes effe	ective when the document is	filed by the secretar	y of state.		
B. This document becomes effe					
the date of signing. The delayed ef	fective date is:				
C. This document takes effect upon the occurrence of a future event or fact, other than the					
passage of time. The 90 th day after the date of signing is:					
The following event or fact will cause the document to take effect in the manner described below:					

Execution

The undersigned affirms that the person designated as registered agent has consented to the appointment. The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument and certifies under penalty of perjury that the undersigned is authorized to execute the filing instrument.

Date: January 21,2013

Signature of organizer

Daniel M. Schmeling

Printed or typed name of organizer