

# NORTH CAROLINA Department of the Secretary of State

#### To all whom these presents shall come, Greetings:

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify the following and hereto attached to be a true copy of

#### ARTICLES OF INCORPORATION

**OF** 

### RYAN'S RUN HOA, INC.

the original of which was filed in this office on the 24th day of October, 2022.





IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 24th day of October, 2022.

Elaine J. Marshall

**Secretary of State** 

SOSID: 2511232 Date Filed: 10/24/2022 3:42:00 PM Elaine F. Marshall North Carolina Secretary of State C2022 297 01437

## 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:  Ryan's Run	HOA, 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:  Clark Hastings C	Campbell .						
4.	The street address and county of the initial registered agent's office of the corpo	The street address and county of the initial registered agent's office of the corporation is:						
	Number and Street: 175 E New Hampshire Avenue							
	City: SOUTHERN PINES State: NC Zip Code: 28387-5529 County: Moore							
	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	ame Address						
	Clark Hastings Campbell 175 E New Hampshire Avenue SOUT 28387-5529 United States	THERN PINES NC,						
6.	(Check aither "a" or "h" helow )							
0.	(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 asset	Attached are provisions regarding the distribution of the corporation's assets upon its dissolution.						
8.	Attached are provisions regarding the limitation of activities of the corporation.							

BUSINESS REGISTRATION DIVISION (Revised August, 2017)

P. O. BOX 29622

RALEIGH, NC 27626-0622 Form N-01

9.	Any other provisions which the corporation elects to include are attached.						
10.	The street address and county of the principal office of the corporation is:						
	Principal Office Telephone Number:(910) 68		(910) 684	4-8126			
	Number and Street: 244 National Drive						
	City: Pinehurst	State: N	C Zip Code:	28374-81	59 County:	Moore	
	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:		
11.	Principal Office Email A	ddress:	Pri	vacy Red	daction		
12. (	<b>Optional):</b> Listing of Off Name	icers (See in	structions for w Address	hy this is	important)	Title	
	David T Upchurch		244 National Drive Pinehurst NC, 28374-8159 United States		CC 04.251 00V.	President	
13. 14.	(Optional): Please provide a business e-mail address: Privacy Redaction  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.  These articles will be effective upon filing, unless a future time and/or date is specified:						
This is the		,20 <sup>22</sup> .	-				
i ms is me_	This is the 24th day of October ,2022			-	Incorporator Business Entity Name		
					Clark H	Hastings Campbell	
						ure of Incorporator	
				Clark Hastings Campbell Incorporator			
				Type or	print Incorp	porator's name and title, if any	
NOTES: 1. Filing	fee is \$60. This document n	nust be filed w	vith the Secretary	of State.			
BUSINESS REGISTRATION DIVISION (Revised August, 2017)		P. O. BOX	29622		RALEIGH, NC 27626-062: Form N-01		

Certification# C202229701437-1 Reference# C202229701437- Page: 3 of 4