## TRANSMITTAL LETTER

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

600003101286--1 -01/18/00--01101--006 \*\*\*\*\*87.50 \*\*\*\*\*87.50

MARGARETA CORPORATION SUBJECT: (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 of

Status

□\$78.75

Filing Fee

& Certified Copy

**3** \$87.50

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: MIRELA

Name (Printed or typed)

COVERSTONE Address

(727)785-6073

Daytime Telephone number

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

## **ARTICLES OF INCORPORATION**

Signature/Incorporator

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

ARTICLE I The name of the corporation shall be: MARGARETA CORPORATION ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: City of Oldsmar, Pinellas County 1240 COVERSTONE CT., OLDSMAR, FL 34677 ARTICLE III PURPOSE(S) The specific purpose(s) for which the corporation is organized is(are): CHARITY FOR ELDERLY, SPECIFICALLY TO PROCURE AND SHIP FOOD AND CLOTHING IMPOVERISHED ELDERLY POPULATION OF ROMANIA. ARTICLE IV MANNER OF ELECTION OF DIRECTORS The manner in which the directors are elected or appointed is: SIMPLE MAJORITY ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: MIRELA BLOCH 1240 COVERSTONE CT. OLDSMAR, ARTICLE VI INCORPORATOR The name and address of the Incorporator to these Articles of Incorporation are: MIRELA COVERSTONE CT.

(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.

hirela	Block	01-17-2000
Signature/Registered Agent		Date