

TRANSMITTAL LETTER

P00000080899

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

400003365754--1
-08/21/00--01083--012
*****87.50 *****87.50

SUBJECT: Mari's Alterations & Dress Shop, Inc.
(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

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Marines Hoppes
Name (Printed or typed)

1424 Duailen Avenue
Address

Orlando FL 32804
City, State & Zip

(407) 938-3991
Daytime Telephone number

FILED
00 AUG 21 PM 4:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

[Handwritten signature]
8.25

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Mari's Alterations & Dress Shop, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1424 Quailen Avenue
Orlando FL 32804

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

200

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Marines Hoppes
1424 Quailen Ave Orlando FL 32804

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Marines Hoppes
1424 Quailen Ave
Orlando FL 32804

Marines Hoppes
Signature/Incorporator

Aug. 18, 2000
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

Marine Hopper
Signature/Registered Agent

August 18, 2000
Date

FILED
00 AUG 21 PM 4:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA