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TRANSMITTAL LETTER

FILED

00 DEC 14 PM 3: 26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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-12/14/00--01018--002
*****78.75 *****78.75

SUBJECT: MARIE M.F. WOODBRIDGE, P.A.
(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

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

FROM: MARIE M.F. WOODBRIDGE, P.A.
Name (printed or typed)
3655 BOCA GIEGA DR., #308
Address
NAPLES, FL., 34112
City, State & Zip
941-774-5052
Daytime Telephone number

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

2. 13/15/02 ✓

ARTICLES OF INCORPORATION

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

The name of the corporation shall be:

MARIE M.F. WOODBRIDGE, P.A.

ARTICLE II PRINCIPAL OFFICE

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

3655 BOCA GIEGA DR., #308
NAPLES, FL., 34112

ARTICLE III SHARES

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

5000 Sh. - No Par Common
VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MARIE M.F. WOODBRIDGE
3655 BOCA GIEGA DR., #308
NAPLES, FL., 34112

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

MARIE M.F. WOOLDRIDGE
3655 BOCA CIEGA DR., #308
NAPLES, FL, 34112

Purpose:

Real Estate Salesperson

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

1st day of JAN., 192001

Marie M.F. Wooldridge
Signature

Signature

Signature

**Articles of Incorporation
Filing Fee - \$35 .**

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: MAGE M.F. Hoolbridge, P.A.

2. The name and address of the registered agent and office is:

MAGE M.F. Hoolbridge
(Name)

3655 BOCA CIEGA DR., #308
(P.O. Box not acceptable)

NAPLES, FL, 34112
(City/State/Zip)

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.

Mage M.F. Hoolbridge
(Signature)

11/1/00
(Date)