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SECRETARY OF STATE

TRANSMITTAL LETTER

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

SUBJECT:	PETMAR MARK	Eting INC NAME-MUST INCLUDI	· • · · · · · · · · · · · · · · · · · ·	
	(PROPOSED CORPORATE	NAME – MUST INCLUDI	i Suffix)	
Enclosed is an origin	nal and one(1) copy of the articl	es of incorporation and a	check for	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
	Peter S	FROM: OMEZ rinted or typed)		
10263 Whis pering forest DR. #617				
JACKSONVILLE, FL 32257 City, State & Zip				

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Prof	fit)
ARTICLE I NAME The name of the corporation shall be: ARTICLE I NAME The name of the corporation shall be:	larketing, Inc.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 10263 ##617 Jacks	onville, FL 32257
ARTICLE III PURPOSE The purpose for which the corporation is organized is: MAR	
ARTICLE IV SHARES The number of shares of stock is: 5000	
ARTICLE V INITIAL OFFICERS/DIRECTORS (op The name(s), address(es) and title(s):	tional)
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:	10263 Whispering Fore
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	Jacksonville, FL 3225
PETER GOMEZ 10263 Whispering Forest Drive #617 JACKSONVILLE, FL 32257	*************
Having been named as registered agent to accept service of process for the certificate, I am familiar with and accept the appointment as registered agen.	above stated corporation at the place designated in this
Pala	1-14-03
Signature/Registered/Agent	Date

Signature/Incorporator