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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

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

**SUBJECT:** MARTEX M INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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:** WLADYSLAWA OCHOLSKA  
Name (Printed or typed)

1050 CAPRI ISLES BLVD. APARTMENT # P - 304  
Address

VENICE, FLORIDA 34292  
City, State & Zip

941-544-5721  
Daytime Telephone number

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

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

MARTEX M INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

1050 Capri Isles Blvd. Apartment # P - 304  
Venice, Florida 34292

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Janitorial & Maintenance Service

**ARTICLE IV SHARES**

The number of shares of stock is:

100%

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s), address(es) and title(s):

Wladyslawa Ocholska  
1050 Capri Isles Blvd. Apartment # P - 304  
Venice, Florida 34292  
President

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

Wladyslawa Ocholska  
1050 Capri Isles Blvd. Apartment # P - 304  
Venice, Florida 34292

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Wladyslawa Ocholska  
1050 Capri Isles Blvd. Apartment # P - 304  
Venice, Florida 34292

\*\*\*\*\*

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

Wladyslawa Ocholska  
Signature/Registered Agent

03/18/03  
Date

Wladyslawa Ocholska  
Signature/Incorporator

03/18/03  
Date