

PO3000055239

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

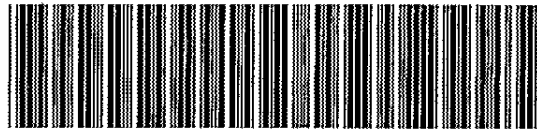
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03 MAY 12 AM 8:42  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## TRANSMITTAL LETTER

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

SUBJECT: MARIANIC CORPORATION  
(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: NIKOS ORPHANOUDAKIS  
Name (Printed or typed)

P. O. BOX 508  
Address

BABSON PARK, FL 33827  
City, State & Zip

(863) 678-1318  
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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TALLAHASSEE FLORIDA

**ARTICLE I: NAME OF CORPORATION**

The name of the corporation shall be **MARIANIC CORPORATION.**

**ARTICLE II: PRINCIPAL OFFICE**

The principal place of business and mailing address of the corporation is

**550 BURNS AVE., NO. 45  
LAKE WALES, FL 33853**

**ARTICLE III: PURPOSE OF CORPORATION**

The purpose for which the corporation is organized is

**to sell imported consumer products as well as provide management consulting services.**

**ARTICLE IV: SHARES OF STOCK OF CORPORATION**

The corporation shall be authorized to issue 1,000 shares of common stock with a designated par value of \$1.00 per share.

**ARTICLE V: INITIAL OFFICERS/DIRECTORS**

The name, address, and title of the initial officer and director of the corporation is

**NIKOS ORPHANOUDAKIS  
PRESIDENT AND DIRECTOR  
550 BURNS AVE., NO. 45  
LAKE WALES, FL 33853**

**ARTICLE VI: REGISTERED AGENT**

The name and Florida street address of the registered agent is

**NIKOS ORPHANOUDAKIS  
550 BURNS AVE., NO. 45  
LAKE WALES, FL 33853**

**ARTICLE VII: INCORPORATOR**

The name and address of the Incorporator is

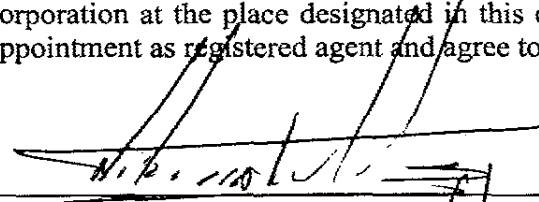
**NIKOS ORPHANOUDAKIS  
550 BURNS AVE., NO. 45  
LAKE WALES, FL 33853**

**FILED**

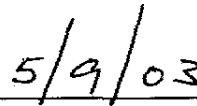
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**SECRETARY OF STATE  
TALLAHASSEE FLORIDA**

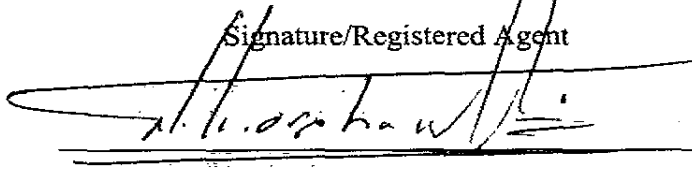
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.




Signature/Registered Agent



Date



Signature/Incorporator



Date