## PCB000116560

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
(-1,7-1-1-1-1-1,7			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
D. WHITE OCT 2 0 2003			
A D' MHILE ACI S A Sons			

Office Use Only



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)3 DCT 20 PM 2: 19 SECRETARY OF STATE NIT AHASSEE FLORID

## TRANSMITTAL LETTER

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

SUBJECT:	PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUFFIX)
	•		
Enclosed are an orig	pinal and one (1) copy of the ar	ticles of incorporation and	d 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 PPY REQUIRED
FROM:	Tommre Lee Gair	(Printed or typed)	
-	12630 Equestrian	(1r, #1815 Address	
-	Fort myers, Floric	a 33907 State & Zip	
-	(239) 246-9135 Daytime 3	elephone number	

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



RECEIVED
03 OCT 17 PM 12: 19

## FLORIDA DEPARTMENT OF STATE SECTION OF SECTION OF STATE SECTION OF SECTION OF STATE SECTION OF SECTIO

October 6, 2003

TOMMIE LEE GAINES SR. 12630 EQUESTRIAN CIR #1815 FT MYERS, FL 33907

SUBJECT: MARQUIS INC. Ref. Number: W03000028749

We have received your document for MARQUIS INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

## Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document must state the number of shares of authorized stock.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White Document Specialist New Filings Section

Letter Number: 803A00054673

ARTICLE I NAME	03 OCT 2
The name of the corporation shall be:	SECRETAR TUF STATE TALLAHASSEE FLORIDA
marquis of Lee County Inc.	
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	•
12630 Equestrian Cr. #1815	
Fortmyers, Florida 33907	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	·-···
To repair and refinish any type of leather	•
ARTICLE IV SHARES	
The number of shares of stock is:	
10	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)	
The name(s), address(es) and title(s):	
The name and Florida street address of the registered agent in	
The name and Florida street address of the registered agent is:  Tommie Lee Gaines Jr.	
12630 Equestrian Cir. #1815	
Fort Myers, Florida 33907	-
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Tommie Lee Gaines Jr.	
12630 Equestrian Cir. #1815	
Fort myers, fla, 33907	***********
Having been named as registered agent to accept service of process for the above stated certificate, I am familiar with and accept the appointment as registered agent and agree	
America Maria	0/21-102
Signature/Registered Agent	<u> </u>
activities to Proceed villants	Dau
Dommie Danie	9/2/1/13
Signature/Incorporator	Date
-	

ARTICLES OF INCORPORATION

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

FILED

03 OCT 20 PM 2: 19