

P030000153364

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

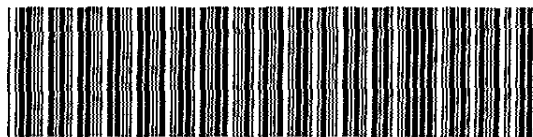
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400025382844

12/11/03--01027--006 **70.00

FILED
03 DEC 11 PM 5:45
STATE
TALLAHASSEE, FLORIDA

CB12-18

TRANSMITTAL LETTER

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

SUBJECT: _____

Martin Subcontracting, 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: _____

George Martin

Name (Printed or typed)

1205 NE 19 street

Address

Cape Coral FL 33909

City, State & Zip

239-458-4047

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)

ARTICLE I NAME

The name of the corporation shall be:

Martin Subcontracting, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1205 NE 19 street
Cape Coral, FL 33909

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Cabinet construction, subcontracting, installation

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

George Martin
Director, Pres., Treas.
1205 NE 19 Street
Cape Coral, FL 33909

Elisa Martin
Vice Pres, Secretary
1205 NE 19 street
Cape Coral, FL 33909

ARTICLE VI REGISTERED AGENT

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

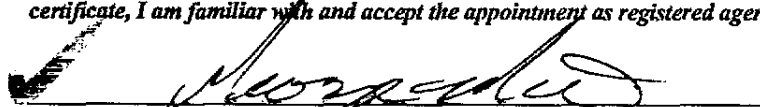
George Martin
1205 NE 19 st,
Cape Coral, FL 33909

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Ann Thompson
1841 Brown Rd.
Alva, FL 33920

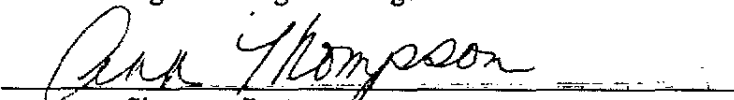
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

 12-1-03

Date



Signature/Incorporator

11-17-03

Date