

P04000063160

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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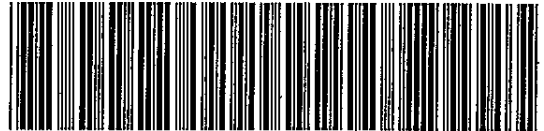
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TRANSMITTAL LETTER

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

SUBJECT: MCG PROFESSIONAL SERVICES, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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:

Maria Cristina Gonzalez

Name (Printed or typed)

5209 Johnson St

Address

Hollywood, FL 33021

City, State & Zip

(305) 934-1759

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:

MCG PROFESSIONAL SERVICES, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5209 Johnson St
Hollywood, Fl 33021

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide Notary services & Real Estate services

ARTICLE IV SHARES

The number of shares of stock is:

100 shares

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Maria Cristina Gonzalez
5209 Johnson St
Hollywood, Fl 33021

ARTICLE VI REGISTERED AGENT

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

Maria Cristina Gonzalez
5209 Johnson St
Hollywood, Fl 33021

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Maria Cristina Gonzalez
5209 Johnson St
Hollywood, Fl 33021

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

McGonzalez
Signature/Registered Agent

4/8/04
Date

McGonzalez
Signature/Incorporator

4/8/04
Date

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04 APR 12 PM 3:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA