

PO40000 82974

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

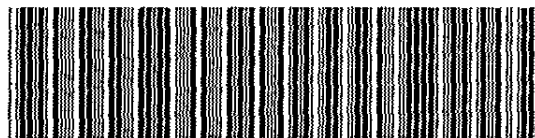
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

150925/14

## TRANSMITTAL LETTER

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

SUBJECT: Mapari 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: Marta R. Rizzo  
Name (Printed or typed)

3760 17th ave SW  
Address

Naples FL 34117  
City, State & Zip

237-591-4747  
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: Mapari, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

3760 7th ave SW  
naples FL 34117

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

CONSTRUCTION

**ARTICLE IV SHARES**

The number of shares of stock is:

1,000 @ \$1 PAR

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Marta R. Rizzo  
3760 7th ave SW  
naples FL 34117

**ARTICLE VI REGISTERED AGENT**

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

Marta R. Rizzo  
3760 7th ave SW  
naples FL 34117

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Marta R. Rizzo  
3760 7th ave SW  
naples FL 34117

\*\*\*\*\*

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

X Marta R. Rizzo  
Signature/Registered Agent

X 5-19-04  
Date

X Marta R. Rizzo  
Signature/Incorporator

X 5-19-04  
Date

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