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# TRANSMITTAL LETTER

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

SUBJECT: MELET	IA COMBS INCORPORATED		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the arti-	cles of incorporation and	a check for:
\$70.00	<b>☑</b> \$78.75	\$78.75	<b>□</b> \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
g	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of
			Status
		ADDITIONAL COPY REQUIRED	
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FROM: Dan	ve Samueis	(Printed or typed)	
	Name	(rinica or typea)	
4	55044 Club Court		
<u>-</u>		Address	
	Independin Florido 20044		
<u>-</u>	Jacksonville Florida 32011	State & Zip	
	City,	menorin and starter	
<u> </u>	904-874-4285		
, <del>*</del>		elephone 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:

MELETIA COMBS INCORPORATED

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SECRETARY OF STATE TALL AHASSEE FLORIDA

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 9243 11th AVE, JACKSONVILLE FL. 32209

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
THE PURCHASE MANAGEMENT AND SELLING OF RENTAL PROPERTIES

### ARTICLE IV SHARES

The number of shares of stock is:

10

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DAVE SAMUELS 55044 CLUB COURT, JACKSONVILLE FL 32011 ROXANNE COMBS 55044 CLUB COURT JACKSONVILLE FL 32011

### ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

MELETIA COMBS 9243 11th AVE. JACKSONVILLE FL 32209

### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

DAVE SAMUELS 55044 CLUB COURT JACKSONVILLE FL. 32011

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

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Signature/Incorporator

Date