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Pertified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	
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2006 MAR 27 AM II: 2: SECRETADY DE STATE TALLAHASSES, FLORIDA

7. BOSTON MAR 2. 8 2008

## **COVER LETTER**

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

SUBJECT: Mart	in's Catering Inc.		
	(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	d a check for:
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	
		ADDITIONAL CO	OPY REQUIRED
FROM: Je	effrey S Martin		
	Name	(Printed or typed)	
	9780 Tonya CT		
•		Address	
	Bonita Springs, FL 341		
	City,	State & Zip	
:	239-495-1476		
	Daytime T	elephone number	

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

# OB MAR 27 AN II:

### 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's Catering Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

9780 Tonya ct. Bonita Springs, FL 34135

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any lawful Business

### ARTICLE IV SHARES

The number of shares of stock is:

1000

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Deanna L Martin- Vice President 9780 Tonya ct Bonita Springs, FL 34135

### ARTICLE VI REGISTERED AGENT

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

Jeffrey S Martin 9780 Tonya ct Bonita Springs, FL 34135

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jeffrey S Martin 9780 Tonya Ct Bonita Springs, FL 34135

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

ignatuce/Registered Agent

Signature/Incorporator

Date