

PO6000057818

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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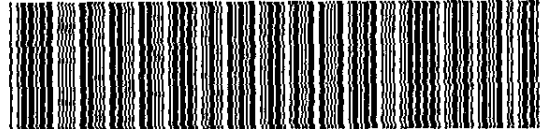
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 APR 24 PM 3:23

B. McKnight APR 24 2006

## COVER LETTER

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

SUBJECT: Madison Taylor Corp

(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: melvin floyd

Name (Printed or typed)

p.o. box 623094

Address

oviedo, fl 32762

City, State & Zip

407.466.0523

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:

Madison Taylor Corp.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. 623251 Oviedo, Fl 32762

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Real estate holdings

### ARTICLE IV SHARES

The number of shares of stock is:

100

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Melvin Floyd P.O. Box 623094 Oviedo, Fl 32762 C.E.O

Joan Floyd P.O. box 623094 Oviedo , Fl 32762 E.A

### ARTICLE VI REGISTERED AGENT

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

Melvin Floyd 439 Aulin Ave. Oviedo, Fl 32765

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Melvin Floyd p.o. box 623094 Oviedo, Fl 332762

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\*\*\*\*\*

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

4.21.06  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

4.21.06  
\_\_\_\_\_  
Date