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TRANSMITTAL LETTER

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

SUBJECT:	nontiko	MARINE,	INC	
((PROPOSED CORPORA	TE NAME – <u>MUST INCLÚ</u>)	DE SUFFIX)	
		·		
Enclosed is an original and one(1) copy of the Articles of Incorporation and a check for:				
\$70.00	\$78.75	□\$78.75	\$87.50	
Filing Fee	Filing Fee &	Filing Fee	Filing Fee,	
	Certificate of	& Certified Copy	Certified Copy	
	Status		& Certificate	
		ADDITIONAL COPY REQUIRED		
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FROM: Doug LAS M LEARY

Name (Printed or typed)

HI31 WhildEN LN

Address

LEES DUR FZ 3.4788

City, State & Zip

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: MONTIKO MARINE, INC.	06 JUL 31 PM 4: 24 SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 41131 Whilden LN ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
ANY LAWFULL busiNESS Allowed by State ARTICLE IV SHARES The number of shares of stock is: 500 sh (NON PAR)	of Florida
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Douglas M LEARY PRES: 41131 Whilden LN LES DURG, FL 34788 ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent	
Doug LAS M LEARY 41(3) Whitden LN ARTICLE VII INCORPORATOR LEES BURG, FL 34788 The name and address of the Incorporator is: Doug LAS M LEARY 41131 Whilden LN LEES BURG FL 34788	
Having been named as registered agent to accept service of process for the above stated corporation at a certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capa Signature/Registered Agent	the place designated in this

Signature/Incorporator