

PD7000015778

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

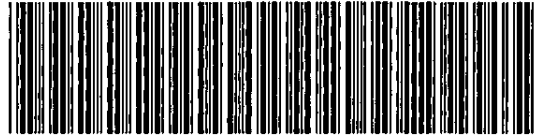
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2007 FEB -5 AM 9:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Mid-Florida Mobile Notary 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: Eileen Martens
Name (Printed or typed)

1844 Guatemala Blvd.
Address

Winter Haven FL 33881
City, State & Zip

863-298-0237
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: *Mid-Florida Mobile Notary Corp.*

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: *1844 Guatemala Blvd.
Winter Haven Fl.
33881*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
*Mobile Real Estate closer For Title Companies.
covering from coast to coast center state of Florida*

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):

*Eileen Martens
1844 Guatemala Blvd
Winter Haven Fl. 33881*

ARTICLE VI REGISTERED AGENT

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

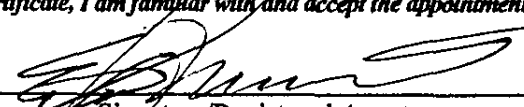
*Eileen Martens
1844 Guatemala Blvd.
Winter Haven Fl. 33881*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Eileen Martens
1844 Guatemala Blvd.
Winter Haven Fl. 33881*

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

2-1-2007

Date



Signature/Incorporator

2-1-2007

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA