# P0700063664

. (Req	uestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nam	ne)
<u> </u>	ument Number)	
: Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	
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# **COVER LETTER**

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

SUBJECT: MAF	RES INC.	TE NAME – MUST INCL	TIDE CHEETY)
	(FROFOSED CORFORA	TE NAME – <u>MOST NCL</u>	ODE SUPIX)
Enclosed are an ori	ginal and one (1) copy of the arti	icles of incorporation and	d a check for:
\$70.00 Filing Fee	₹78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: N	IARES INC.		
1101111	Name	(Printed or typed)	
	3661 NW 95 TERRACE, U	UNIT #806	•
		Address	
	SUNRISE, FL 33351		
k	City,	State & Zip	
	(954) 288-0203		
	Daytime 7	Telephone number	<del> </del>

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



May 21, 2007

MARTHA C. RESTREPO 3661 NW 95 TERRACE UNIT #806 SUNRISE, FL 33351

SUBJECT: MARES, INC.

Ref. Number: W07000024278

We have received your document for MARES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

## Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch
Document Specialist
New Filing Section

Letter Number: 707A00035265

# 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:

MARCERESA INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3661 NW 95 TERRACE, UNIT #806 SUNRISE FL. 33351

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

**REALTOR** 

#### ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MARTHA C. RESTREPO, PRESIDENT 3661 NW 95 TERRACE, UNIT #806 SUNRISE FL. 33351

#### ARTICLE VI REGISTERED AGENT

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

MARTHA C. RESTREPO 3661 NW 95 TERRACE, UNIT #806

SUNRISE FL. 33351

#### ARTICLE VII INCORPORATOR

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

MARTHA C. RESTREPO 3661 NW 95 TERRACE, UNIT #806 SUNRISE FL. 33351

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

Houther Chestyn	05/25/07
Signature/Registered Agent	Date
Martin le Richipio	05/25/07
Signature/Incorporator	Date