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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

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

**SUBJECT:** Maramaps Corporation

(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:** SHAWN M RYAN

Name (Printed or typed)

19239 Autumn Woods Ave

Address

Tampa, FL 33647-3067

City, State & Zip

813-382-8916

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 27, 2008

SHAWN M RYAN  
19239 AUTUMN WOODS AVE  
TAMPA, FL 33647

SUBJECT: MARAMAPS CORPORATION  
Ref. Number: W08000016005

We have received your document for MARAMAPS CORPORATION and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the corporation's principal street address and/or a mailing address in the document. A post office box is not acceptable for the principal address.

Please return the corrected 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) 245-6962.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 708A00018336

**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:

Maramaps Corporation

**ARTICLE II PRINCIPAL OFFICE**

The principle street address and mailing address, if different is:

19239 Autumn Woods Ave, Tampa, FL 33647-3067

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To design and manufacture, or have manufactured, and sell furniture and gift items related to boating and the marine industry.

**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):

Shawn M. Ryan - President/Treasurer/Secretary  
19239 Autumn Woods Ave, Tampa, FL 33647-3067

**ARTICLE VI REGISTERED AGENT**

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

Shawn M. Ryan  
19239 Autumn Woods Ave, Tampa, FL 33647-3067

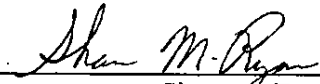
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Shawn Ryan  
19239 Autumn Woods Ave, Tampa, FL 33647-3067

\*\*\*\*\*

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



Signature/Incorporator

FILED  
08 APR -3 PM 3:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

3/24/08

Date

3/24/08

Date