

P08000074460

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

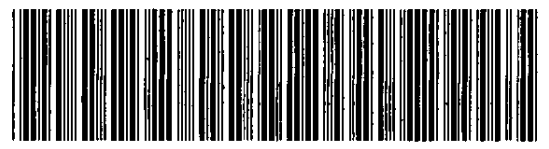
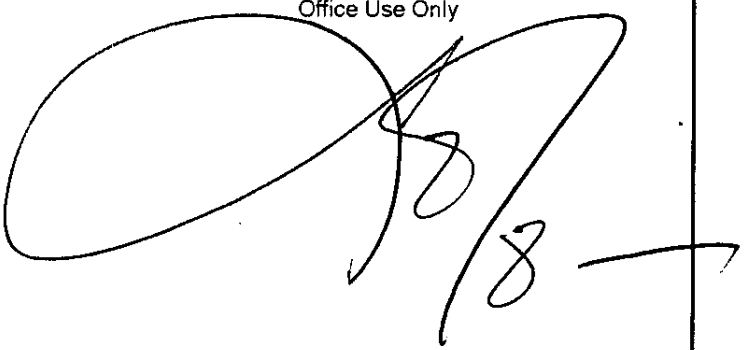
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500134070315

08/08/08--01015--007 \*\*78.75

FILED  
08 AUG - 8 PM 12: 32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Marcus, INC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

<input type="checkbox"/> \$70.00 Filing Fee	<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certificate of Status	<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>			

FROM: Marcus Dublin  
Name (Printed or typed)

532 N Madison Ave  
Address

Orlando FL 32805  
City, State & Zip

407 276 3358  
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)

FILED  
08 AUG - 8 PM 12: 32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

Marcus INC

**ARTICLE II PRINCIPAL OFFICE**

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

532 N Madison Ave  
Orlando FL 32805

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Hair and Makeup

**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):

Marcus Dublin  
532 N Madison Ave  
Orlando FL 32805

**ARTICLE VI REGISTERED AGENT**

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


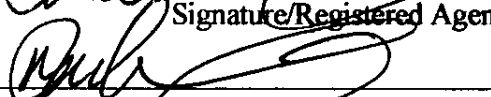
Marcus Dublin  
532 N Madison Ave  
Orlando FL 32805

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Marcus INC  
532 N Madison Ave  
Orlando FL 32805

\*\*\*\*\*  
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

7/3/08  
\_\_\_\_\_  
Date  
7/3/08  
\_\_\_\_\_  
Date