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(City/State/Zip/Phone #)

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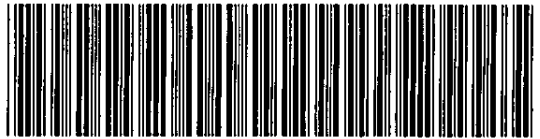
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08 OCT 13 AM 1:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

27

COVER LETTER

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

SUBJECT: MARK FOUR MGMT INC.

(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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: JOANN BRAUN

Name (Printed or typed)

8537 BELFRY PLACE

Address

PORT ST LUCIE FL 34986

City, State & Zip

772.370.4802

Daytime Telephone number

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

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SECRETARY OF STATE
TALLAHASSEE, FL 32399

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:

MARK FOUR MGMT INC.

ARTICLE II PRINCIPAL OFFICE

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

8537 BELFRY PL
PT ST LUCIE FL 34986

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

COMMUNITY ASSN PROPERTY MANAGEMENT

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):

JOANN BRAUN, 8537 BELFRY PLACE, PT ST LUCIE, FL 34986 - PRESIDENT
RICHARD POOLE, 8437 BELFRY PLACE, PT ST LUCIE, FL 34986 - VICE PRESIDENT

ARTICLE VI REGISTERED AGENT

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

JOANN BRAUN, 8537 BELFRY PLACE, PT ST LUCIE, FL 34986

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JOANN BRAUN, 8537 BELFRY PL, PT ST LUCIE, FL 34986

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

Joann Braun
Signature/Registered Agent

10-09-2008

Date

Joann Braun
Signature/Incorporator

10-09-2008

Date