

PO8000101476

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

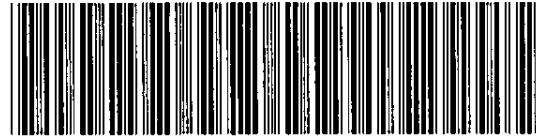
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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RECEIVED
08 NOV 13 AM 10:53
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
08 NOV 13 AM 9:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VH

FILINGS, INC. TERESA ROMAN

(Requestor's Name)

2805 LITTLE DEAL ROAD

(Address)

TALLAHASSEE, FLORIDA 32308

(City, State, Zip)

1106
385-5735

(Phone #)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. MARAR MULTI-SERVICES CO.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)



Walk in



Pick up time 2:00



Certified Copy



Mail out



Will wait



Photocopy



Certificate of Status

NEW FILINGS

☐	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS

☐	Amendment
☐	Resignation of R.A., Officer/Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS

☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

**REGISTRATION/
QUALIFICATION**

☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

Examiner's Initials

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:

Marar Multi-Services Co.

ARTICLE II PRINCIPAL OFFICE

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

2142 SW Algiers Street
Port St. Lucie, FL 34953

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Import & Export

ARTICLE IV SHARES

The number of shares of stock is:

1,000 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Rafaelina Rodriguez D. P, S, T
Jennifer Concepcion D

ARTICLE VI REGISTERED AGENT

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

2142 SW Algiers Street
Port St. Lucie, FL 34953

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: Rafaelina Rodriguez

2142 SW Algiers Street
Port St. Lucie, FL 34953

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 /Incorporator
Rafaelina Rodriguez

Nov 6, 2008
Date

FILED
08 NOV 13 AM 9:50
SECRETARY OF STATE
ALLAHASSEE, FLORIDA