

P09000006617

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

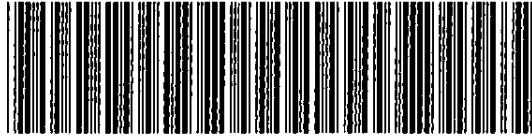
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Certified Copies _____

Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 JAN 21 PM 12:32

FILED

MRS
1/22

COVER LETTER

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

SUBJECT: Mary Lowry 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
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: Mary Lowry

Name (Printed or typed)

5655 SW 87th Lane

Address

Ocala, Fl. 34476

City, State & Zip

352 208 0416

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)

ARTICLE I NAME

The name of the corporation shall be:

Mary Lowry Inc.

ARTICLE II PRINCIPAL OFFICE

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

5655 SW 87th Lane
Ocala, Fl. 34476

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Property Management

ARTICLE IV SHARES

The number of shares of stock is:

10 (ten)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Mary E Lowry - President
5655 SW 87th Lane
Ocala, Fl 34476

ARTICLE VI REGISTERED AGENT

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

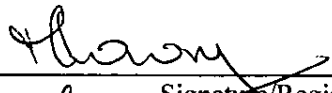
Mary E Lowry
5655 SW 87th Lane
Ocala, Fl. 34476

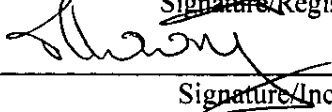
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Mary Lowry
5655 SW 87th Lane
Ocala, Fl. 34476

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

09 JAN 21 PM 12:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/20/09

Date

1/20/09

Date