

PO900001834

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(Business Entity Name)

(Document Number)

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*[Handwritten signature]*

**COVER LETTER**

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

SUBJECT: M2 Loy Surety Agency, 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: MURRAY LOY  
Name (Printed or typed)

936 W TROPICAL WAY  
Address

PLANTATION, FL 33317  
City, State & Zip

954-650-3214  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 27, 2009

MYRNA LOY  
936 W TROPICAL WAY  
PLANTATION, FL 33317

SUBJECT: MZLOY SURETY AGENCY, INC.  
Ref. Number: W09000004000

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

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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) 245-6052.

Paisley A Alford  
Clerk  
New Filing Section

Letter Number: 409A00002894

# 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:

MZLOY Surety Agency, INC

## ARTICLE II PRINCIPAL OFFICE

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

1128 NW 31 Ave  
Fort Lauderdale, FL 33311

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

manage Surety agents, distribute Related materials to agents, maintain offices to write Limited Surety Bonds

## ARTICLE IV SHARES

The number of shares of stock is:

~~100~~ 100 ml

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Myrna Loy president  
936 W. Tropical Way  
Plantation, FL 33317

## ARTICLE VI REGISTERED AGENT

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

Myrna Loy  
936 W. Tropical Way  
Plantation, FL 33317

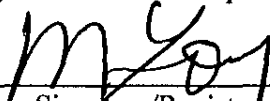
## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

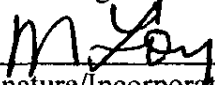
Myrna Loy  
936 W. Tropical Way  
Plantation FL 33317

\*\*\*\*\*

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

1-10-09

Date

1-10-09

Date

09 FEB -6 AM 10:50

FILED