

PO9000036581

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

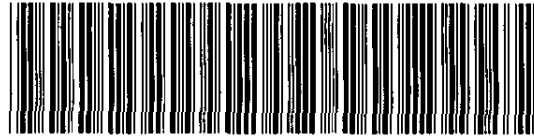
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DEPARTMENT OF REVENUE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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09 APR 24 AM 10:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. SHIVERS APR 24 2009

## COVER LETTER

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

SUBJECT: MALIA, 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: Linda Sapp  
Name (Printed or typed)

10515 Blue Wing Court  
Address

Tallahassee FL 32312  
City, State & Zip

(850) 264-4836  
Daytime Telephone number

**FILED**  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

MALIA, Inc.

## ARTICLE II PRINCIPAL OFFICE

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

10515 Blue Wing Court  
Tallahassee, FL 32312

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any + All lawful business

## ARTICLE IV SHARES

The number of shares of stock is:

1

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Linda Sapp, Director  
10515 Blue Wing Court  
Tallahassee, FL 32312

## ARTICLE VI REGISTERED AGENT

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

Linda Sapp  
10515 Blue Wing Court  
Tallahassee, FL 32312

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Linda Sapp  
10515 Blue Wing Court  
Tallahassee, FL 32312

\*\*\*\*\*

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

Linda Sapp

Signature/Registered Agent

Linda Sapp

Signature/Incorporator

4/24/09

Date

4/24/09

Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09 APR 24 AM 10:32

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