

P09000057728

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

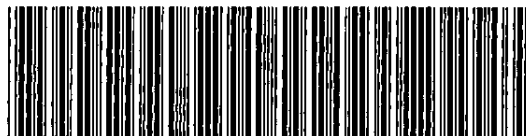
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

60-1-1

COVER LETTER

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

SUBJECT: Maggie's Place, 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: Lazara M. Del Castillo

Name (Printed or typed)

2721 - 176th Street

Address

Lake City, FL 32024-3028

City, State & Zip

386-344-5274

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:

Maggie's Place, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2816 SW State Road 247
Lake City, FL. 32024

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To conduct all and any business activity that is legal & proper under both Florida State & US federal laws; specifically but not limited to retail sales.

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):

Lazara M del Castillo -- Director / President / Secretary / Treasurer
2713 - 176th Street, Lake City, FL 32024

ARTICLE VI REGISTERED AGENT

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

Lazara M del Castillo
2713 - 176th Street
Lake City, FL 32024

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lazara M del Castillo
2713 - 176th Street
Lake City, FL 32024

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5/13/09
Date

5/13/09
Date