

PD9000059449

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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(Business Entity Name)

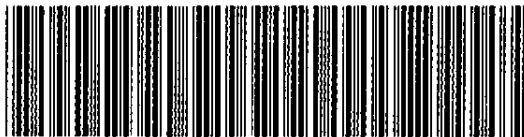
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Paul*  
7/13/09

## COVER LETTER

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

SUBJECT: MARASHI & ASSOCIATES, P.A.  
(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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status  
**ADDITIONAL COPY REQUIRED**

FROM: Moeln Marashi  
Name (Printed or typed)

450 Knights Run Ave., Unit 1605  
Address

Tampa, FL 33602  
City, State & Zip

(813) 482-4899  
Daytime Telephone number

moeinlegal@aol.com  
E-mail address: (to be used for future annual report notification)

**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:

MARASHI & ASSOCIATES, P.A.

**ARTICLE II      PRINCIPAL OFFICE**

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

4511 N. HIMES AVENUE, SUITE 200  
TAMPA, FL 33614

**ARTICLE III      PURPOSE**

The purpose for which the corporation is organized is:

LAW OFFICES PROVIDING LEGAL SERVICES

**ARTICLE IV      SHARES**

The number of shares of stock is:

1000 SHARES

**ARTICLE V      INITIAL OFFICERS AND/OR DIRECTORS**

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

MOEIN MARASHI  
4511 N. HIMES AVENUE, SUITE 200, TAMPA, FL 33614  
PRESIDENT

**ARTICLE VI      REGISTERED AGENT**

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

MOEIN MARASHI, ESQUIRE  
450 KNIGHTS RUN AVENUE, UNIT 1605  
TAMPA, FL 33602

**ARTICLE VII      INCORPORATOR**

The name and address of the Incorporator is:

MOEIN MARASHI  
450 KNIGHTS RUN AVENUE, UNIT 1605  
TAMPA, FL 33602

\*\*\*\*\*

*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**

2009 JUL 10 P 4:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

7/8/09  
Date

7/8/09  
Date