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09 DEC 21 AM 8:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EP 12/23/09

COVER LETTER

**Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314**

SUBJECT: MAKARA METH, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

<input checked="" type="checkbox"/> \$70.00	<input type="checkbox"/> \$78.75
Filing Fee	Filing Fee & Certificate of Status

<input type="checkbox"/> \$78.75	<input type="checkbox"/> \$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
ADDITIONAL COPY REQUIRED	

FROM: MAKARA METH

Name (Printed or typed)

8700 MAITLAND BLVD, #152

Address

ORLANDO, FL 32810

City, State & Zip

386-479-6435

Daytime Telephone number

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:

Makara Meth, Inc.

ARTICLE II PRINCIPAL OFFICE

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

*8700 Maitland Summit Blvd, #152
Orlando, FL 32810*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide Communication Consulting Services

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):

*Makara Meth, President & Director
8700 Maitland Summit Blvd, #152
Orlando, FL 32810*

ARTICLE VI REGISTERED AGENT

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

*Makara Meth
8700 Maitland Summit Blvd, #152
Orlando, FL 32810*

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

*Makara Meth
8700 Maitland Summit Blvd, #152
Orlando, FL 32810*

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 DEC 21 AM 8:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12-17-09

Date

12-17-09

Date