

P10000058392

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

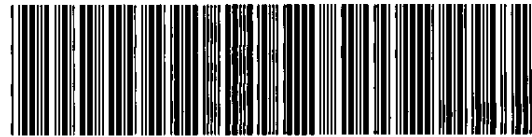
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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AND  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 JUL 15 PM 5:06

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AND  
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VA

## COVER LETTER

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

**SUBJECT:** Victoria Martz Golf Design, 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      ☐ \$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:** Victoria Martz

\_\_\_\_\_  
Name (Printed or typed)

11440 Sedgemore Drive East

\_\_\_\_\_  
Address

Jacksonville, Florida 32223

\_\_\_\_\_  
City, State & Zip

904-268-7492

\_\_\_\_\_  
Daytime Telephone number

VMartzGCA@gmail.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:

Victoria Martz Golf Design, Inc.

### **ARTICLE II      PRINCIPAL OFFICE**

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

11440 Sedgemoore Drive East

Jacksonville, FL 32223

### **ARTICLE III      PURPOSE**

The purpose for which the corporation is organized is:

Service - consulting in golf and landscape design

### **ARTICLE IV      SHARES**

The number of shares of stock is:

1000

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

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

Victoria Martz, President  
11440 Sedgemoore Drive  
East  
Jacksonville, FL 32223

### **ARTICLE VI      REGISTERED AGENT**

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

Gary Martz

11440 Sedgemoore Drive East

Jacksonville, FL 32223

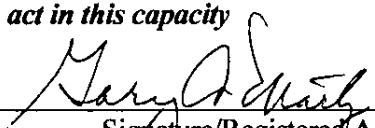
### **ARTICLE VII      INCORPORATOR**

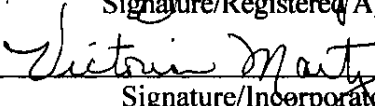
The name and address of the Incorporator is:

Victoria Martz

11440 Sedgemoore Dr. E., Jacksonville, FL 32223

\*\*\*\*\*  
*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*

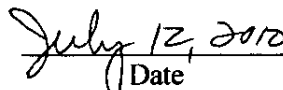
  
\_\_\_\_\_  
Signature/Registered Agent

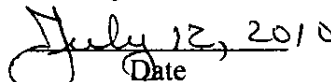
  
\_\_\_\_\_  
Signature/Incorporator

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AND  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

  
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Date

  
\_\_\_\_\_  
Date