

711000012296

(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



600192991916

02/03/11--01012--018 **87.50

FILED
2011 FEB -3 AM 11:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers FEB 04 2011

COVER LETTER

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

SUBJECT: MRG Investment Group, 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: **Mark C. Kramer**

Name (Printed or typed)

13846 Atlantic Boulevard #417

Address

Jacksonville, FL 32225

City, State & Zip

904-226-2771

Daytime Telephone number

gaylekramer@comcast.net

E-mail address (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 FEB -3 AM 11:43

FILED

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: **MRG Investment Group, Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
11555 Central Parkway #602
Jacksonville, FL 32224

Mailing address, if different is:
13846 Atlantic Boulevard #417
Jacksonville, FL 32225

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

**Selling Finance Products to
Automobile Dealers**

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Mark C. Kramer, CEO**
Address: **13846 Atlantic Boulevard #417**
Jacksonville, FL 32225

Name and Title: _____
Address: _____

Name and Title: **Gayle L. Kramer, CFO**
Address: **13846 Atlantic Boulevard #417**
Jacksonville, FL 32225

Name and Title: _____
Address: _____

Name and Title: **Randall R. Rhoden, COO**
Address: **11151 Chester Lake Road W**
Jacksonville, FL 32256

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: **Gayle L. Kramer**
Address: **13846 Atlantic Boulevard #417**
Jacksonville, FL 32225

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: **Mark C. Kramer**
Address: **13846 Atlantic Boulevard #417**
Jacksonville, FL 32225

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



Required Signature/Registered Agent

2-1-11

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

2-11-11

Date

FILED
2011 FEB -3 AM 11:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA