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TALLAHASSEE, FLORIDA

J. Shivers JAN 26 2012

COVER LETTER

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

SUBJECT: MarLynne Adjusting, 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: Martin S. Axel
Name (Printed or typed)

4017 Big Pass Lane
Address

Punta Gorda, Florida 33955
City, State & Zip

941 505-9199
Daytime Telephone number

marlynnne2@gmail.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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: MarLynne Adjusting, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
4017 Big Pass Lane
Punta Gorda, Florida 33955

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To do any and all things and exercise any and all powers which it might now or hereafter be lawful for the corporation to do or exercise under and pursuant to the Florida corporation statutes under which the corporation is incorporated, or under any other Florida statute supplemental thereto that is now in force or that may hereafter be applicable thereto.

ARTICLE IV SHARES

The number of shares of stock is: 100 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Martin S. Axel, Director and President</u>	Name and Title: _____
Address: <u>4017 Big Pass Lane</u>	Address: _____
<u>Punta Gorda, Florida 33955</u>	_____

Name and Title: <u>Lynne R. Axel, Director and Secretary</u>	Name and Title: _____
Address: <u>4017 Big Pass Lane</u>	Address: _____
<u>Punta Gorda, Florida 33955</u>	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

ARTICLE VI REGISTERED AGENT

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

Name: Martin S. Axel
Address: 4017 Big Pass Lane
Punta Gorda, Florida 33955

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Martin S. Axel
Address: 4017 Big Pass Lane
Punta Gorda, Florida 33955

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

Martin S. Axel

Required Signature/Registered Agent

1/23/2017
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.

Martin S. Axel

Required Signature/Incorporator

1/23/2017
Date

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TALLAHASSEE, FLORIDA