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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

**SUBJECT:** MARQUIS CARS, 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:** Joseph Cula

Name (Printed or typed)

15923 Biscayne Blvd. Suite 208

Address

North Miami, FL 33160

City, State & Zip

7864412911

Daytime Telephone number

info@marquiscars.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**

**Marquis Cars, Inc.**

The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
15923 Biscayne Blvd.  
Suite 208  
North Miami, FL 33160

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MAILING ADDRESS, IF DIFFERENT IS:

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

All and every licit commercial activity.

**ARTICLE IV SHARES**

The number of shares of stock is: 10

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

Name and Title: Joseph Cula  
Address: 15923 Biscayne Blvd.  
Suite 208  
North Miami, FL 33160

Name and Title: George Hanz  
Address: 15923 Biscayne Blvd.  
Suite 208  
North Miami, FL 33160

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

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: Joseph Cula  
Address: 15923 Biscayne Blvd. Suite 208  
North Miami, FL 33160

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Joseph Cula  
Address: 15923 Biscayne Blvd. Suite 208  
North Miami, FL 33160

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

 JOSEPH CULA  
Required Signature/Registered Agent

09/25/12  
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.

 JOSEPH CULA  
Required Signature/Incorporator

09/25/12  
Date