

P12000084655

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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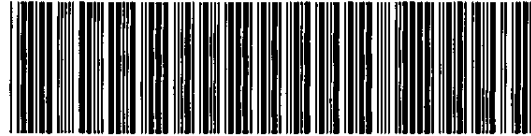
(Business Entity Name)

(Document Number)

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

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12 OCT -5 AM 8:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers OCT 08 2012  
119  
12-2-13

## COVER LETTER

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

SUBJECT: Marlan Drywall, 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: Marlan A Borden

Name (Printed or typed)

1414 Ellis Trace Drive West

Address

Jacksonville, Florida 32205

City, State & Zip

(904)-509-4593

Daytime Telephone number

marlanborden@att.net

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

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

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TALLAHASSEE, FLORIDA

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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

M.A.B. Drywall, INC.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
1414 Ellis Trace Drive West  
Jacksonville, Florida 32205

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

M.A.B. Drywall, INC. completely installs and finishes all aspects of drywall.

**ARTICLE IV SHARES**

The corporation is authorized to issue 1000 shares of stock describe as follow: 100 shares of voting common stock without PAR Value designated as Class A. 900 shares of non voting common stock without PAR Value designated as Class B

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

Name and Title: <u>Marlan Avery Borden</u>	Name and Title: _____
Address: <u>1414 Ellis Trace Drive West</u>	Address: _____
<u>Jacksonville, Florida 32205</u>	_____

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

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: Marlan Avery Borden  
Address: 1414 Ellis Trace Drive West  
Jacksonville, Florida 32205

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Marlan Avery Borden  
Address: 1414 Ellis Trace Drive West  
Jacksonville, Florida 32205

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TALLAHASSEE FLORIDA

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*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*

Marlan A. Borden  
Required Signature/Registered Agent

10-01-12  
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.*

Marlan A. Borden  
Required Signature/Incorporator

10-01-12  
Date