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COVER LETTER

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

SUBJECT: MA	RIANNA FOGGII		
· · · · · · · · · · · · · · · · · · ·	(PROPOSED CORPORA	TE NAME – <u>MUST INCLU</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	l 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
	PY REQUIRED		
FROM: H	ERBERT J. BUC	e (Printed or typed)	
54	105 JAEGER RC	DAD	
		Address	
N	APLES, FL 3410		
	City	, State & Zip	
23	39-514-4244		
	Daytime 1	Telephone number	
	E-mail address: (to be asset	naples luxed for future annual report	ory sales. Com

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)

The name of the corporation shall be: MARIANNA FOGGIN, P.A. ARTICLE II PRINCIPAL OFFICE Principal street address MARIANNA FOGGIN, P.A. 2008 TIMBERLINE DR NAPLES, FLORIDA 34109 ARTICLE IV SHARES The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: MARIANNA FOGGIN Address: 2009 TIMBERLINE DR NAPLES, FLORIDA 34109 Name and Title: Name and Title: Name and Title: Address: Address	<u>ARTICLE I</u>	<u>NAME</u>	ALA DIA NINI	A ECCCINID /	^
Principal street address Mailing address, if different is: MARIANNA POGON, P.A. 2005 TIMBERLINE OR NAPLES, FLORIDA 34109 ARTICLE III PURPOSE The purpose for which the corporation is organized is: REALTOR ARTICLE IV SHARES The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: MARIANNA FOGON Address: NAPLES, FLORIDA 34109 Name and Title: NAPLES, FLORIDA 34109 Name and Title: Naples, FLORIDA 34109 Name and Title: Name and Title: Address:	The name of the o	corporation shall be:	WAKIANN	A FUGGIN, P.F	₹.
Principal street address Mailing address, if different is: MARIANNA FOGGIN, P.A. 2008 TIMBERLINE OR NAPLES, FLORIDA 34109 ARTICLE III PURPOSE The purpose for which the corporation is organized is: REALTOR ARTICLE IV SHARES The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: MARIANNA FOGGIN Address: Name and Title: MARIANNA FOGGIN Naples, FLORIDA 34109 Name and Title: Naples, FLORIDA 34109 Name and Title: Naples, FLORIDA 34109 Name and Title: Name and Title: Address: Add	ARTICLE II	PRINCIPAL OF	FICE		
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ARTICLE III PURPOSE The purpose for which the corporation is organized is: REALTOR ARTICLE IV SHARES The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: MARIANNA FOOGIN Name and Title: MAPLES, FLORIDA 34103 Name and Title: Name and Title: Name and Title: Address: Addre					<u> </u>
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Address: Address	Name and	Title: MARIANNA FOGGIN			
Name and Title: Address: Name and Title: Address: Name and Title: Address: Name and Title: Address: Address: Address: Address: ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: MARIANNA FOGGIN Address: Address: Address: ARTICLE VII INCORPORATOR				Address:	
Name and Title: Address: Name and Title: Address: Name and Title: Address: Name and Title: Address: Address: Address: Address: ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Name: MARIANNA FOGGIN Address: Address: ARTICLE VI INCORPORATOR		NAPLES, FLORIDA			
Address: Name and Title: Address: Name and Title: Address: Address: Address: ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Name: Address: Name: Naricle VI Name: Address: Name: Name: Naricle VI Name: Naricle VI INCORPORATOR					
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Name and Title: Address: Address: Address: Address: ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Name: Address: Name: Address: Name: Address: ARTICLE VII INCORPORATOR Name: Nam		Title:		Name and Title:	
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The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: 2009 TIMBERLINE DR NAPLES, FLORIDA 34109 ARTICLE VII INCORPORATOR	ARTICLE VI	REGISTERED A	ACENT		₹
Name: MARIANNA FOGGIN Address: 2009 TIMBERLINE DR NAPLES, FLORIDA 34109 ARTICLE VII INCORPORATOR				e) of the registered agent is:	EX 73
Address: 2009 TIMBERLINE DR NAPLES, FLORIDA 34109 ARTICLE VII INCORPORATOR			• • • • • • • • • • • • • • • • • • • •	·	ZE B 254
ARTICLE VII INCORPORATOR		2009 TIMBERLIN			200
		NAPLES, FLORID	JA 34109		SS .
					en <u>~</u>
The name and address of the Incorporator is:					
10 Maria 10					
Name: MARIANNA FOGGIN OF THE PR				<u> </u>	82
Address: 2009 TIMBERLINE DR NAPLES, FLORIDA 34109	Address:				
NAPLES, FLORIDA 34109		IVAPLES, PLONIL	JA 34103		>
Having/been named as registered agent to accept service of process for the above stated corporation at the place designated	Having/heen na	med as registered age	ent to accept service of pro	ocess for the above stated cornor	ration 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					
	W/V/2	, " ($\sum_{i=1}^{n} 2^{n}$. 1
11/20/15	17.10	11000	100		11/20/12/
Required Signature Registered Agent Date	- 11-70	Paguired S	Signature/Digistered Agent		Date /
Required Signature Agent Date	•	Required S	nghature/Hegistered Agent		Date
I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in	I submit this do	cument and affirm th	hat the facts stated herein	are true. I am aware that the fo	alse information submitted in a
documently the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.					
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1/28/1	KA	, / \	<u></u>		
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