P13000012038

(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:
CORRECTED ARTICLE IV
(SHANES) TO MERO "1"
PER TELEPHONE CONVER-
SATION WITH MARCA.
BRUSS. 2 02/06/13

Office Use Only



900244213659

02/04/13--01021--010 **87.50

13 FEB -4 PM 2: 28
SECRETARY OF STATE
AND AHASSEE, FLORIO

T 02/06/13

· COVER LETTER

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

SUBJECT: Marc's Custom Concrete Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)	
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	d 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:	Marc A. Brus Name 4085 N.E. 17H	_		
	OCALA, FL City,	34479 State & Zip		
	(352) 208-434		, 10 ₁ 0 <u></u>	
	bruss concrete (E-mail address: (to be use	2 yahoo . com d 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)

The name of the corporation shall be: Marc's Custom Concrete Inc					
	VCIPAL OFFICE Principal <u>street</u> address	·	Mailing address, if different is:		
4085 NE	17th AvE.				
OCALA, F	L 34479				
ARTICLE III PURI The purpose for which the	POSE ne corporation is organized is: 5	ubconfract	concrete work.		
			7. 3 F. 3 F. 5		
			NAS 1.		
ARTICLE IV SHA The number of shares of s			PH 2: 28 E.FLORIDA		
ARTICLE V INIT	ial officers and/or direc	TORS			
Name and Title	Holly C. Weigold/	V.P. Name and Title:	Mare A. Bruss / President		
Address	4085 NE 17th AVE	Address:	4085 NE17HL ANE		
	OCALA, FL 344;	79	4085 NE 17H ANE OLAIA, FL 34479		
Name and Title:		Name and Title:			
Address		Address:			
Name and Title:		Name and Title:			
Address			· · · · · · · · · · · · · · · · · · ·		

Name a	and Title:	Name and Title:	
Addre	ss	Address:	
		<u> </u>	
ARTICLE VI			
The <u>name and l</u>	Florida street address (P.O. Box NOT acceptable		
Name:	Marc A. Bruss	_	e'
Address:	4085 NEITH AVE		78 13
	OCALA, FL 34479		AR H
<u>ARTICLE VI</u>	INCORPORATOR		3 FEB -4 PM 2: 28 ECRETARY OF STATE LLAHASSEE, FLORIDA
The <u>name and </u>	address of the Incorporator is:		
Name:	Marc A. Bruss		2: 28 TATE ORIO
Address:	4085 NE 1742 AVE		
	4085 NE 1744 AVE OCALA, FL 34479		
Having been no this certificate, i	umed as registered agent to accept service of proc I am familiar with and accept the appointment as	ess for the above stated corpora registered agent and agree to ac	ation at the place designated in t in this capacity
m	an a. Bus		1/27/13
	Required Signature/Registered Agent		Date
document to the	ocument and affirm that the facts stated herein a Department of State constitutes a third degree fe	ire true. I am aware that the fa lony as provided for in s.817.155	lse information submitted in a 5, F.S.
Man	e O. Bruss Required Signature/Incorporator		1/27/13
	Required Signature/Incorporator		Date