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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

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DIVISION OF CORPORATIONS  
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2/19/13

## COVER LETTER

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

**SUBJECT:** Margarita Soubllette, 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      ☒ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Margarita Soubllette

Name (Printed or typed)

2001 North Ocean Blvd, #1804

Address

Boca Raton, FL 33431

City, State & Zip

561-674-3074

Daytime Telephone number

margaritasoubllette@hotmail.com

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

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**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)

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**ARTICLE I NAME**

The name of the corporation shall be: Margarita Soublette, Inc.

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**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

2001 North Ocean Blvd, #1804

Boca Raton, FL 33431

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Provide, but not limited to, foreign language interpretation and translation services.

**ARTICLE IV SHARES** 10,000

The number of shares of stock is: \_\_\_\_\_

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

Name and Title: Margarita Soublette, President

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

Address 2001 North Ocean Blvd, #1804

Address: \_\_\_\_\_

Boca Raton, FL 33431

Name and Title: John J. Dowling VP & Sec.

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

Address 2001 North Ocean Blvd, #1804

Address: \_\_\_\_\_

Boca Raton, FL 33431

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

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

Address \_\_\_\_\_

Address: \_\_\_\_\_

(conti.)

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: Margarita Soubllette  
Address: 2001 North Ocean Blvd, #1804  
Boca Raton, FL 33431

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Margarita Soubllette  
Address: 2001 North Ocean Blvd, #1804  
Boca Raton, FL 33431

*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*

*M. Soubllette*

Required Signature/Registered Agent

02/14/2013

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.*

*M. Soubllette*

Required Signature/Incorporator

02/14/2013

Date

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