

P13000035632

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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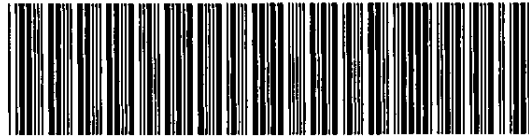
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/18/13--01005--004 **70.00

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13 APR 18 PM 4:38
TALLAHASSEE, FLORIDA

π 04/19/13

COVER LETTER

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

SUBJECT: **MAKE YOUR LUCK MARKETING, 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: **JOHN T. KENNEDY**

Name (Printed or typed)

1221 RIVERSIDE DRIVE

Address

PALM CITY, FLORIDA 34990

City, State & Zip

(772) 283-8880

Daytime Telephone number

jtk477@aol.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

The name of the corporation shall be: MAKE YOUR LUCK MARKETING, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1221 Riverside Drive

Palm City; FL 34990

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: All activities permitted by law

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: John T. Kennedy, President, Secretary & Shareholder

Address: 1221 Riverside Drive
Palm City, FL 34990

Name and Title: _____

Address: _____

Name and Title: Kelsey A. Kennedy, Vice President & Shareholder

Address: 605 10th Avenue North
Jacksonville Beach, FL 32250

Name and Title: _____

Address: _____

Name and Title: Regional Sansaricq, Vice President

Address: 10515 Plainview Circle
Boca Raton, FL 33498

Name and Title: _____

Address: _____

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CLERK OF DISTRICT COURT
JACKSONVILLE, FLORIDA

(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: Reginald Sansaricq
Address: 10515 Plainview Circle
Boca Raton, FL 33498

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DEPARTMENT OF STATE

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: John T. Kennedy
Address: 1221 Riverside Drive
Palm City, FL 34994

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

Reginald Sansaricq
Required Signature/Registered Agent
John T. Kennedy

April 18, 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.

John T. Kennedy
Required Signature/Incorporator
John T. Kennedy

April 18, 2013
Date