

P13000071689

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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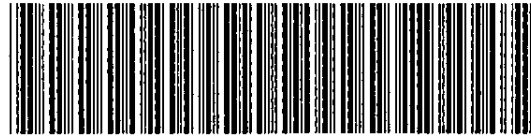
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2013 AUG 26 PM 2:16

1/11

COVER LETTER

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

SUBJECT: **ST JOSEPH MARINA MART 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: **BOB LANE'S ACCOUNTING**
Name (Printed or typed)
400 TOMPKINS STREET
Address
INVERNESS, FL 34450-4139
City, State & Zip
352-344-2888
Daytime Telephone number
rlanejr@tampabay.rr.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:

ST JOSEPH MARINA MART INC

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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5980 W. GULF TO LAKE HWY

CRYSTAL RIVER, FL 34429

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CONVENIENCE STORE WITH GAS

AND/OR ANY OTHER BUSINESS OF A LAWFUL NATURE

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: EMAD SHOUKRY ATTIA-President

Name and Title:

Address

4530 W. Hightower Lane

Address:

Lecanto, FL 34461-9722

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

(cont.)

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: EMAD SHOUKRY ATTIA

Address: 4530 W. Hightower Lane

Lecanto, FL 34461-9722

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: EMAD SHOUKRY ATTIA

Address: 4530 W. Hightower Lane

Lecanto, FL 34461-9722

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

Emad S. Attia

Required Signature/Registered Agent

08/22/2013

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.

Emad S. Attia

Required Signature/Incorporator

08/22/2013

Date

ARTICLE VIII EFFECTIVE DATE

Effective Date: September 15, 2013

