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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2013 OCT -4 PM 12:59

1/4

**COVER LETTER**

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

**SUBJECT: MRDL JR'S BBQ 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: Mark A Cowan**

Name (Printed or typed)

**3453 NE 12th St**

Address

**Ocala Fl. 34470**

City, State & Zip

**352-875-1843**

Daytime Telephone number

**invoices@markandlaura.biz**

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:

MRDL JR'S BBQ INC

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**ARTICLE II PRINCIPAL OFFICE**

Principal street address

3453 NE 12TH ST

OCALA FL 34470

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Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

MOBILE FOOD SERVICE

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

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

Name and Title: Mark A Cowan President

Address: 3453 NE12th St  
Ocala Fl 34470

Name and Title: Laura D Cowan Vice President

Address: 3453 NE 12th St  
Ocala Fl 34470

Name and Title: Deborah A Clarkson Treasurer

Address: 3453 NE 12th St  
Ocala Fl 34470

Name and Title: Robert J Stewart IV Secretary

Address: 3453 NE 12th St  
Ocala Fl 34470

Name and Title:

Address:

Name and Title:

Address:

(cont.)

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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: Mark A Cowan  
Address: 3453 NE 12th St  
Ocala FL 34470

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Mark A Cowan  
Address: 3453 NE 12th St  
Ocala FL 34470

*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*

Mark A. Cowan

Required Signature/Registered Agent

10-2-13

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.*

Mark A. Cowan

Required Signature/Incorporator

10-2-13

Date