

P13 000085635

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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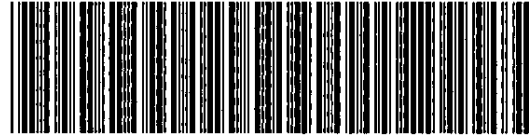
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 OCT 18 AM 11:10

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## COVER LETTER

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

SUBJECT: **Marte Tile Corp.**

(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: **Marte Tile Corp.**

Name (Printed or typed)

**4923 Springfield Dr.**

Address

**West Palm Beach, FL 33415**

City, State & Zip

**561-309-4715**

Daytime Telephone number

**vista1040@gmail.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)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLE I NAME**

The name of the corporation shall be:

Marte Tile Corp.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

13 OCT 18 AM 11:10

Mailing address, if different is:

4923 Springfield Dr.

West Palm Beach, FL 33415

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

to conduct any and all lawful business.

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

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

Name and Title: Ramon A. Marte, D., Pres.

Name and Title:

Address

4923 Springfield Dr.

Address:

West Palm Beach, FL 33415

Name and Title: Amparo A. Rodriguez, D, T, S

Name and Title:

Address

4923 Springfield Dr.

Address:

West Palm Beach, FL 33415

Name and Title: David Rodriguez, V.P.

Name and Title:

Address

4923 Springfield Dr.

Address:

West Palm Beach, FL 33415

(cont.)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_ 13 OCT 18 AM 11:10

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

\_\_\_\_\_

\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Ramon A. Marte

Address: 4923 Springfield Dr.

West Palm Beach, FL 33415

**ARTICLE VII INCORPORATOR**

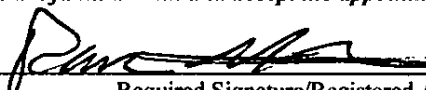
The name and address of the Incorporator is:

Name: Ramon A. Marte

Address: 4923 Springfield Dr.

West Palm Beach, FL 33415

*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*

  
Required Signature/Registered Agent

10/15/13  
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.*

  
Required Signature/Incorporator

10/15/13  
Date

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