

COVER LETTER

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

SUBJECT: Morgan Davis & Associates, 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: Tomasz Fabianski

Name (Printed or typed)

1414 Portmoor Way

Address

Winter Garden, FL 34787

City, State & Zip

352-223-7828

Daytime Telephone number

Tomschultz2014@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)

APPROVED
AND
FILED

ARTICLE I NAME

The name of the corporation shall be:

Morgan Davis & Associates, Inc.

14 SEP 24 PM 1:48

ARTICLE II PRINCIPAL OFFICE

Principal street address

SECRETARY OF STATE
TALLAHASSEE, FL 32399
Mailing address, if different is: 0172

37 North Orange Ave.,

Suite 500

Orlando, FL 32801

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any legal activity including but not limited to collecting debt

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Tomasz J. Fabianski, Pres.

Address: 1414 Portmoor Way
Winter Garden, FL 34787

Name and Title: Wei A. Lee, Vice Pres.

Address: 609 Silverbirch Dr.
Longwood, FL 32750

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

APPROVAL
AND
FILED (cont.)

14 SEP 24 PM 1:48

Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

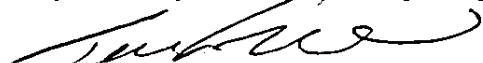
Name: Tomasz Fabianski
Address: 37 North Orange Ave.
Orlando, Fl. 32801

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Tomasz Fabianski
Address: 1414 Portmoor Way
Winter Garden, Fl. 34787P


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

9-21-14
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

9-21-14
Date