

PH000085652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

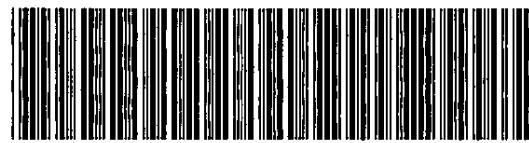
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800263326788

08/18/14--01009--008 \*\*87.50

14 OCT 15 MM:41  
RECEIVED  
CLERK'S OFFICE  
CLERK OF THE  
STATE OF TEXAS  
2015

WTA-51152

## COVER LETTER

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

**SUBJECT: MARTIN SIX CONSULTANTS 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      & Certificate of  
                    Status      Status

**ADDITIONAL COPY REQUIRED**

FROM: **DARREN M. MARTIN**

Name (Printed or typed)

**1110 SANTA ROSA BLVD., UNIT A308**

Address

**FORT WALTON BEACH, FL. 32548**

City, State & Zip

**(985) 259-2559**

Daytime Telephone number

**darren75martin@att.net**

E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**



Oct 21, 2014

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 21, 2014

DARREN M. MARTIN  
1110 SANTA ROSA BLVD UNIT A308  
FORT WALTON BEACH, FL 32548

SUBJECT: MARTIN SIX CONSULTANTS INC.  
Ref. Number: W14000051157

We have received your document for MARTIN SIX CONSULTANTS INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason  
Regulatory Specialist II

Letter Number: 714A00017980

RECEIVED  
14 OCT 15 PM12:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: MARTIN SIX CONSULTANTS INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
1110 SANTA ROSA BLVD. UNIT A308  
FORT WALTON BEACH, FL. 32548

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: FOR PROFIT

ALL DIRECTORS HAVE BEEN ELECTED.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: DARREN M. MARTIN Name and Title: PRESIDENT

Address 1110 SANTA ROSA BLVD., UNIT A308 Address: 1110 SANTA ROSA BLVD., UNIT A308  
FORT WALTON BEACH, FL. 32548

Name and Title: JILL T. MARTIN Name and Title: SECRETARY/TREASURER

Address 1110 SANTA ROSA BLVD., UNIT A308 Address: 1110 SANTA ROSA BLVD., UNIT A308  
FORT WALTON BEACH, FL. 32548

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

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

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: **DARREN M. MARTIN**  
Address: **1110 SANTA ROSA BLVD., UNIT A308**  
**FORT WALTON BEACH, FL. 32548**

## **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: **DARREN M. MARTIN**  
Address: **1110 SANTA ROSA BLVD., UNIT A308**  
**FORT WALTON BEACH, FL. 32548**

*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**

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**

Date Oct 15 AM 11:46