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(Re	equestor's Name)	
(Ac	ddress)	
(Ac	tdress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

MAR 0 3 2015 T. SCOTT



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COVER LETTER

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

Jorda SUBJECT:	n P. Marshall, P.A.		
SUBJECT.	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
FROM:	rdan P. Marshall Name 067 Stoney Creek Parkway	e (Printed or typed)	
<u> </u>	-	Address	
Fe	rnandina Beach, FL 32034		
 -	City,	State & Zip	
(90	4) 206-2161		
	Daytime T	elephone number	
jord	danpaulmarshall@icloud.co	m	
	E-mail address: (to be use	d for future annual report i	notification)

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

e <i>ticle ii Pr</i> ordan P. Marsha	INCIPAL OFFICE Principal <u>street</u> address	Mailing add	Mailing address, if different is:	
6067 Stoney Cr	eek Parkway			
ernandina Beac	h, FL 32034			
	the corporation is organized is: REAL ESTATE SALES AND SE	D ALL LAWFUL BUSIN	IESS RELATED TO	
e number of shares of	TIAL OFFICERS AND/OR DIRECTO	<u>RS</u>	15 KA	
e number of shares of	stock is: TIAL OFFICERS AND/OR DIRECTOR Jordan P. Marshall - P/D	Name and Title:	MAR -2	
e number of shares of	stock is: TIAL OFFICERS AND/OR DIRECTOR Jordan P. Marshall - P/D e:	Name and Title: Address:	MAR -2 PM	
e number of shares of ETICLE V INI Name and Titl Address	TIAL OFFICERS AND/OR DIRECTOR Jordan P. Marshall - P/D e: 96067 Stoney Creek Parkway Fernandina Beach, FL 32034	Name and Title: Address:	MAR -2 PM 12: 15	
e number of shares of ETICLE V INI Name and Titl Address	TIAL OFFICERS AND/OR DIRECTOR Jordan P. Marshall - P/D e: 96067 Stoney Creek Parkway Fernandina Beach, FL 32034	Name and Title: Address: Name and Title:	MAR -2 PM 12: 15	
Name and Title Name and Title	TIAL OFFICERS AND/OR DIRECTOR Jordan P. Marshall - P/D e: 96067 Stoney Creek Parkway Fernandina Beach, FL 32034	Name and Title: Address: Name and Title:	MAR -2 PM 12: 15	
Name and Title Name and Title Address	TIAL OFFICERS AND/OR DIRECTOR Jordan P. Marshall - P/D e: 96067 Stoney Creek Parkway Fernandina Beach, FL 32034	Name and Title: Address: Name and Title: Address:	MAR -2 PM 12: 15	

(001111.)

Name an	d Title:	Name and Title:	
Address		_ Address:	
ARTICLE VI	REGISTERED AGENT		
The name and Fl Name:	orida street address (P.O. Box NOT acceptable) o Jordan P. Marshall	f the registered agent is:	
Address:	96067 Stoney Creek Parkway	_	
	Fernandina Beach, FL 32034	_	
ARTICLE VII	INCORPORATOR		
•	Idress of the Incorporator is: Jordan P. Marshall		
Name: Address:	96067 Stoney Creek Parkway	-	
	Fernandina Beach, FL 32034	-	
	ned as registered agent to accept service of process am familiar with and accept the appointment as reg Required Signature/Registered Agent		
I submit this document to the l	ument and affirm that the facts stated herein are Department of State constitutes a third degree felon Required Signature/Incorporator	true. I am aware that the false in any as provided for in s.817.155, F.,	nformation submitted in a S. Date
•	• •		,