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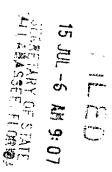
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## **COVER LETTER**

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

SUBJECT: Shannon Ma	rie Inc.	
(PROPOSED CORPORAT	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	cles of incorporation and	d a check for:
☐ \$70.00	☐ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
	ADDITIONAL CO	
FROM: Shannon M. Name	Printed or typed)	
	urd kd.  ddress	
W. Palm Bed	ach, Fl. 3: State & Zip	5411
561.381.035 Daytime Te	elephone number	

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

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

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

The name of the corporation shall be:	nnan Marie Inc.
ARTICLE II PRINCIPAL OFFICE Principal street address	Mailing address, if different is:
3087 Bollard Rd.	beime
W. Palm Beach, Pl.	33411
ARTICLE III PURPOSE The purpose for which the corporation is organized	l is:
Provide education	1 & assistance to the real
estate industry withou	sut limitation to specific industry
	+ Social media musines plans +
ARTICLE IV SHARES  The number of shares of stock is: \_\O\O\ORD  ARTICLE V INITIAL OFFICERS AND/OR D  Name and Title: \_\O\O\O\O\O\O\O\O\O\O\O\O\O\O\O\O\O\O\	IRECTORS  A 1 Bu W Slame and Title:
	1 Rd. Address:
W. Palm bea	
	33411
Name and Title:	Name and Title:
Address	Address:
	SSA D
	ADDRESS AS A SECOND SEC
Name and Title:	Name and Title:
	A.11
/ rudi oss	Address:

. '		
Name and Title:	Name and Title:	
Address	Address:	
	<u> </u>	
	_	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of	of the registered agent is:	
Name: Shannon M. Burnows	_	
Address: 3087 Dollardla.		
W. Bulm beach, Fr. ?	33411	SERRE L
ARTICLE VII INCORPORATOR		100
The <u>name and address</u> of the Incorporator is:		
Name: Shannon W. Bury	DNIS	AH 9: 0
Address: 3087 Bollard Rd	_•	
w. Palm Beach, P	1 33411	
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot days after the filing.)	OPTIONAL) of the more than five business d	ays prior or 90 business
Note: If the date inserted in this block does not meet the applicable the document's effective date on the Department of State's records.	statutory filing requirements, th	is date will not be listed as
Having been named as registered agent to accept service of process this certificate, I am familiar with and accept the appointment as re	s for the above stated corporationsistered agent and agree to act in	on at the place designated in n this capacity
THE STATE OF THE S		(a. 29.15 Date
Required Signature/Registered Agent		24.5
I submit this document and affirm that the facts stated herein are document to the Department of State constitutes a third degree felor	true. I am aware that the false ny as provided for in s.817.155, l	information submitted in a F.S.
		600915
lequired Signature/Acceporator		Date

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