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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 AUG - 7 AM 10:35

APPROVED  
AND  
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## COVER LETTER

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

SUBJECT: MARA MONTGOMERY PA  
(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: MARA MONTGOMERY  
Name (Printed or typed)  
3740 SW 39 ST  
Address  
HOLLYWOOD, FL 33023  
City, State & Zip  
~~954 305 6918~~ 786 357 6815  
Daytime Telephone number  
MARAMONTGOMERY@HOTMAIL.COM  
E-mail address: (to be used for future annual report notification)

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

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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: MARA MONTGOMERY PA

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address  
3740 SW 39 ST  
HOLLYWOOD, FL 33023

Mailing address, if different is:  
3740 SW 39 ST  
HOLLYWOOD, FL 33023

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is: REAL ESTATE AGENT

**ARTICLE IV SHARES** 100  
The number of shares of stock is: \_\_\_\_\_

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

Name and Title:	<u>MARA MONTGOMERY, PRES</u>	Name and Title:	_____
Address	<u>3740 SW 39 ST</u>	Address:	_____
	<u>HOLLYWOOD, FL 33023</u>		_____

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

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

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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: MARA MONTGOMERY  
Address: 3740 SW 39 ST  
HOLLYWOOD, FL 33023

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: MARA MONTGOMERY  
Address: 3740 SW 39 ST  
HOLLYWOOD, FL 33023

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

Mara Montgomery  
Required Signature/Registered Agent

08.04.2015  
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.*

Mara Montgomery  
Required Signature/Incorporator

08.04.2015  
Date