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COVER LETTER

September 11, 2015

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

SUBJECT: Mgadabout, 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

| | |
|--|---|
| <input type="checkbox"/> \$78.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status |
| ADDITIONAL COPY REQUIRED | |

FROM: Kelly M. Hayes, Esq., Siegel, Greenfield, Hayes & Gross P.L.C.

Name (Printed or typed)

One Towne Square, Suite 1835

Address

Southfield, MI 48076

City, State & Zip

248-263-3515

Daytime Telephone number

sharone@sghglaw.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)

ARTICLE I NAME

The name of the corporation shall be: Mgadabout, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
10107 Salisbury Ct.
Ft. Myers, FL 33913

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Mark A. Dowdy, President

Address 10107 Salisbury Ct.
Ft. Myers, FL 33913

Name and Title: Mark A. Dowdy, Secretary

Address: 10107 Salisbury Ct.
Ft. Myers, FL 33913

Name and Title: Mark A. Dowdy, Treasurer

Address 10107 Salisbury Ct.
Ft. Myers, FL 33913

Name and Title: Mark A. Dowdy, Director

Address: 10107 Salisbury Ct.
Ft. Myers, FL 33913

Name and Title: _____

Address _____

Name and Title: _____

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: Mark A. Dowdy

Address: 10107 Salisbury Ct.

Ft. Myers, FL 33913

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Kelly M. Hayes, Esq.

Address: One Towne Square, Suite 1835

Southfield, MI 48076

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


Required Signature/Registered Agent

9-8-2015
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.


Required Signature/Incorporator

9-8-2015
Date