

P17000401281

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

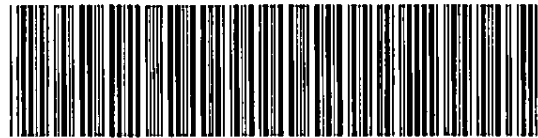
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

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J REYES  
DEC 27 2017

FILED  
17 DEC 27 PM 5:59  
2017 DEC 27 PM 5:59  
FBI/DOJ

## COVER LETTER

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

SUBJECT: MIP GLOBAL 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  
                         Status

**ADDITIONAL COPY REQUIRED**

FROM: Mark PAULY  
Name (Printed or typed)

4127 SW 17th AVE  
Address

Cape Coral FL 33914  
City, State & Zip

651-338-5081  
Daytime Telephone number

MPauly@Live.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: MIP Global INC

ARTICLE II PRINCIPAL OFFICE

Principal street address  
4127 SW 17th Ave  
Cape Coral FL  
33914

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Transportation Freight  
Consulting

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Mank Parly CEO Name and Title: \_\_\_\_\_

Address 4127 SW 17th Ave Address: \_\_\_\_\_  
Cape Coral FL  
33914

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

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

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

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

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17 DEC 27 PM 5:59  
CLERK OF DISTRICT COURT  
JAN 5 2018

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 Pauly

Address: 4127 SW 17th Ave  
Cape Coral FL 33914

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17 DEC 27 PM 5:59  
FLORIDA DEPARTMENT OF  
STATE

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Mark Pauly

Address: 4127 SW 17th Ave  
Cape Coral FL 33914

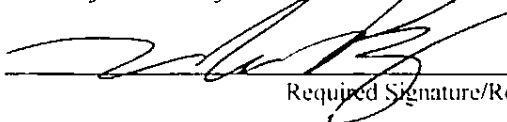
**ARTICLE VIII EFFECTIVE DATE:**

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

12-18-17  
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

12-18-17  
Date