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(Requ	uestor's Name)	
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COVER LETTER

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

MARIA SUBJECT:	NNE COULTON, P.A.		
30bjEC1	(PROPOSED CORPORA	ATE NAME – <u>MÚST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	l 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
		ADDITIONAL CO	
FROM:	rianne Coulton	e (Printed or typed)	, <u> </u>
250	0 Quantum Lakes Drive, Suite 2	03	
 .		Address	
Воу	nton Beach, FL 33426		
	City	State & Zip	
561	-853-2182		
	Daytime 7	Celephone number	
mar	ianne.coulton@gmail.com		
	E-mail address: (to be use	d for future annual report n	otification)

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: MARIANNE COULTON	I, P.A.
ARTICLE II PRINCIPAL OFFICE Principal street address 2500 Quantum Lakes Orive, Suite 2013, Boynton Beach, FL 33426	Mailing address, if different is:
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	ride legal services to the public as Florida Bar Membe
And any and all lawful purposes.	S S S S S S S S S S S S S S S S S S S
	7
	9: 5 E
ARTICLE IV SHARES 1000 The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
Name and Title: Marianne Coulton, President	
Address	
	-
Marianne Coulton, Treasurer	Name and Title:
Address	Address:
Name and Title:	Name and Title:
Address	Address:

Name and	Fitle:	Name and Title:	
Address		Address:	
		<u>م</u>	<u>.</u>
	EGISTERED AGENT	6	10
	ida street address (P.O. Box NOT acceptable) o Marianne Coulton	If the registered agent is:	2 A A
Address:	2500 Quantum Lakes Drive, Suite 203	- 5 - 7	19 A
i -	Boynton Beach, Florida 33426	- - -	10 A
<u>ARTICLE VII IN</u>	CORPORATOR	3	等
The name and add	ress of the Incorporator is:		
Name:	Marianne Coulton		
Address:	2500 Quantum Lakes Drive, Ste 203	_	
	Boynton Beach, FL 33426	-	
Effective date, if of (If an effective date filing.)		. (OPTIONAL) It be more than five days prior or 90 days after the	
Note: If the date in the document's effe	serted in this block does not meet the applicable ctive date on the Department of State's records.	statutory filing requirements, this date will not be listed	d as
Having been named this certificate, I am	l as registered agent to accept service of process familiar with and accept the appointment as rep	for the above stated corporation at the place designal gistered agent and agree to act in this capacity	ted in
- Harrie	Required Signature/Registered Agent		
I submit this docum document to the De	nent and affirm that the facts stated herein are partment of State constitutes a third degree felon	true. I am aware that the false information submitted was provided for in s.817.155. F.S.	f in a
n //	in Cou bu		