121000035126

1	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
	☐ PICK-JP ☐ WAIT ☐ MAIL
	(Business Entity Name)
	(Document Mumber)
Certifi	ed Copies Certificates of Status
Spec	cial instructions to Filing Officer
	Office Use Only



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04/16/21--01001--012 **i78.75

PECEIVED

2591 APR 19 PH 12: 17

4/1/1/20

1.	CORPORATE ACCESS,		you need ACCESS to the world	
	INC. 236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666			
			WALK IN	
	<u> </u>	PICK UP:	4/15 Glinda	
	CERTIFIED COPY	. <u></u>		
X	РНОТОСОРУ	_		_
X	CUS	GS		_
xx	FILING	_AR′	TICLES	
1.	Love Mario Inc. (CORPORATE NAME AND IX	OCUMENT #)		
2.	(CORPORATE NAME AND D	OCUMENT #)		
3.	(CORPORATE NAME AND D	OCUMENT #)		
).	(CORPORATE NAME AND D	OCUMENT #)		
5.	(CORPORATE NAME AND I)	OCUMENT #)		
).	(CORPORATE NAME AND D	OCUMENT #)		
SPECI NSTR	AL UCTIONS:			_

COVER LETTER

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

SUBJECT: Love Marlo Inc.						
(PROPOSED CORPORAT	E NAME - MUST INCLU	IDE SUFFIX)				
Enclosed are an original and one (1) copy of the artic	eles of incorporation and	a check for:				
S70.00 F/\$78.75 Filing Fee Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED				
FROM: Gerald Schilian						
Name (Name (Printed or typed)					
7000 W. Palmetto Pk. Rd, Suite 2	10					
Address						
Boca Raton, FL 33433						
City, State & Zip						
5619948830						
Daytime Te	lephone number					
gerryschilian@gmail.com						
E-mail address: (to be used	for future annual report no	otification)				

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 16, 2021

CORPORATE ACCESS

SUBJECT: LOVE MARLO INC. Ref. Number: W21000051681

We have received your document for LOVE MARLO INC. and your check(\$) ம totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Verify the spelling of the Registered Agents last name.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan Regulatory Specialist III

Letter Number: 621A00007893

www.sunbiz.org

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

ARTICLE I NAME The name of the corporation	on shall be: Love Marlo Inc.		2921 APR 19	PK 12: 17
PRINCE 924 Evergreen Driv Delray Beach, FL	PAL OFFICE Principal street address VC . 33483	Mailing a Same	SECRETALL ddress, if differentlis: 42	(UP STAT) PSEE, FL
(RTICLEJII - PIJRPO)	<u>SE</u> e corporation is organized is: <u>All le</u>			
	ock is: 100 . OFFICERS AND/OR DIRECTORS			
Name and Title:	Malte Lorenz, P.	Name and Title:		1
Address _	924 Evergreen Drive Delray Beach, FFL 33483	Address:		<u> </u>
-	Denty Death, 11 11 33 103			
Name and Title:	Marlo Lorenz, VP	Name and Title:		
Address	924 Evergreen Drive	. Address:		
-	Delray Beach, FL 33483			
-				
Name and Title:_		Name and Title:		
Address _		Address:		
-				<u> </u>

Name and Title:		Name and Title:		
Addres	ss	Address:	 	
	REGISTERED AGENT Storida street address (P.O. Box NOT acceptable) of	the registered agent is:		
Name:	Gerald Schilian		2921	
Address:	7000 W. Palmetto Pk. Rd., Suite 210	28 28	1 x2x	
Address,	Boca Raton, FL 33433		9	:
ARTICLE VII INCORPORATOR		STEPAT	PH 12: 17	
The name and a	ddress of the Incorporator is:	FATE	17	
Name:	Gerald Schilian			
Address:	7000 W. Palmetto Pk. Rd., Suite 210			
	Boca Raton, FL 33433			
Effective date, if	EFFECTIVE DATE: Tother than the date of filing: date is listed, the date must be specific and cannot	be more than five days prior or 90 days after t	he	
	e inserted in this block does not meet the applicable s effective date on the Department of State's records.	statutory filing requirements, this date will not be I	isted as	
	ned as registered agent to accept service of process for familiar with and accept the appointment as registere		ed in this	
		April 15, 2021		
	Required Signature/Registered Agent	Date	i	
	cument and affirm that the facts stated herein are to Department of State constitutes a third degree felony		itted in a	
		April 15, 2021		
Required Signate	ure/hicorporator	Date	<u>-i-</u>	