

P98000060422
TRANSMITTAL LETTER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 JUL -6 PM 1:09

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

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-07/06/98--01088--010
*****78.75 *****78.75

SUBJECT: MARTENS Consulting, Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: David A Martens
Name (printed or typed)

1313 Heritage Acres Blvd.
Address

Rockledge, FL 32955
City, State & Zip

407-631-7641
Daytime Telephone number

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

ARTICLES OF INCORPORATION

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The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: **MARTENS CONSULTING, INC.**

ARTICLE II PRINCIPAL OFFICE

The principle place of business and mailing address of this corporation shall be:

MARTENS CONSULTING, INC.
1313 Heritage Acres Blvd.
Rockledge, Florida 32955

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
7500 shares.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida Street address of the initial registered agent is:

David A. Martens
1313 Heritage Acres Blvd.
Rockledge, Florida 32955

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

David A. Martens
1313 Heritage Acres Blvd.
Rockledge, Florida 32955



Signature/Incorporator



Date

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I here-by accept appointment as registered agent to act in this capacity. I further agree to comply with the provisions of all state statutes relation to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



Signature of Registered Agent



Date