

P99000003619
TRANSMITTAL LETTER

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

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-01/11/99--01090--013
*****78.75 *****78.75

SUBJECT: Mercer Marketing, 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: George E. Mercer
Name (Printed or typed)

1861 Eau Claire CT.
Address

OLDSMAR, FL 34677
City, State & Zip

(727) 787-1554
Daytime Telephone number

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 JAN 11 AM 11:13

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

1-13
WS

ARTICLES OF INCORPORATION

ARTICLE I NAME

The name of the corporation shall be:

Mercer Marketing, Inc.

ARTICLE II PRINCIPAL OFFICE

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

1861 Eau Claire Court
Oldsmar, FL 34677

ARTICLE III SHARES

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

1,200 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

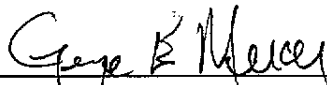
The name and Florida street address of the initial registered agent are:

George E. Mercer
1861 Eau Claire Court
Oldsmar, FL 34677

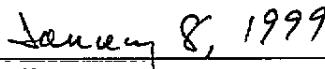
ARTICLE V INCORPORATOR

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

George E. Mercer
1861 Eau Claire Court
Oldsmar, FL 34677



Signature/Incorporator

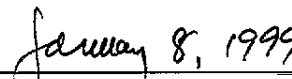


Date

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 hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all statutes relating 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/Registered Agent



Date

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