## P99000 30682

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

SUBJECT:	MARKETTOWN COM	LAOLATIOJ rate name - must include suf	fix)	
		41	000028254 03/31/9901 *****87.50	
Enclosed is an origina	al and one(1) copy of the articles	s of incorporation and a c	check for:	
□ \$70.00 Filing Fee	□ \$78.75 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:	Joins C. W Name (Pr	IH ITWAN inted or typed)		
	MCGOURNC City, S	duiess	99 MAR 30 .AL SECRETARY OF TALLAHASSEE, F	T
	City, S	State & Zip		

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

Daytime Telephone number

## · ARTICLES OF INCORPORATION

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:

MARKSTOWN CORPORSTON

ARTICLE II PRINCIPAL OFFICE

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

6180 KARI OR, Mª BOUNE, FL. 32940

ARTICLE III SHARES

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

100°

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

JOHN WHITHIN 61fo KARI ON

mor gourns, or 3294

INCORPORATOR

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

JOHN WILLIAMAN

6180 KAMI ON

MELBOURNS, RL32910

I'm westerday

2304 MT. HUPE

DK2mos, M: 48864

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

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 the 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