

P99000078003

ROBERT MALONEY

Requestor's Name

8784 EAGLES RIDGE DRIVE

Address

TALLAHASSEE FL 32312 874-0018

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. MARIONA BUREAU, INC  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☒ Walk in ☐ Pick up time \_\_\_\_\_
- ☐ Mail out ☒ Will wait ☐ Photocopy

- ☐ Certified Copy
- ☐ Certificate of Service

RECEIVED  
99 SEP - 1 AM 10: 51  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

99 SEP - 1 AM 11: 02

APPROVED  
AND  
FILED

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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-09/01/99-01034--016  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Examiner's Initials

g/c 9/11

**ARTICLE OF INCORPORATION**

**OF**

**MAGNOLIA BLUFF, INC.**

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: **Magnolia Bluff, Inc.**

**ARTICLE II - DURATION**

The period of its duration is perpetual.

**ARTICLE III - PURPOSE**

The purpose of this corporation is to engage in any activities or business which is permitted under the laws of the United States of America and the State of Florida.

**ARTICLE IV - PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be: **2930 Wellington Circle South, Suite 101, Tallahassee, Florida 32308.**

**ARTICLE V - CAPITAL STOCK**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: **100 shares of (\$1.00) Par value**

**ARTICLE VI - INITIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent is: **Robert E. Maloney, Jr., 2930 Wellington Circle South, Suite 101, Tallahassee, Florida 32308.**

**ARTICLE VII - INCORPORATORS**

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

Name:

Street Address:

**Robert e. Maloney, Jr.**

**2930 Wellington Circle South, Suite 101,  
Tallahassee, FL 32308**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

99 SEP - 1 AM 11:02

APPROVED  
AND  
FILED

## ARTICLE VIII - INITIAL BOARD OF DIRECTORS

The number of directors constituting its initial Board of Directors is one (1), whose name and address is:

Name:

Street Address:

**Jeff Johnson**

**2930 Wellington Circle South, Suite 101,  
Tallahassee, FL 32308**

## ARTICLE IX - OFFICERS

The name and address of the president and secretary is:

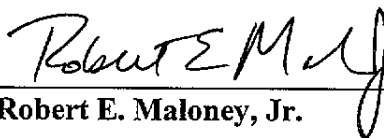
Name:

Street Address:

**Jeff Johnson**

**2930 Wellington Circle South, Suite 101,  
Tallahassee, FL 32308**

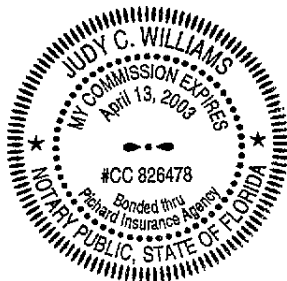
The undersigned has executed these Articles of Incorporation this 31<sup>st</sup> day of August, 1999.

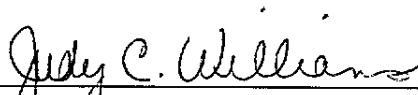
  
Robert E. Maloney, Jr.

**STATE OF FLORIDA  
COUNTY OF LEON**

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared **Robert E. Maloney, Jr.**, to me known to be the persons described in and who executed the foregoing instrument, who acknowledged before me that he executed the same, that I relied upon the following form of identification of the above-named person: personally known, and that an oath (was) (was not) taken.

WITNESS my hand and official seal in the State and County last aforesaid this 31<sup>st</sup> day of August, 1999.



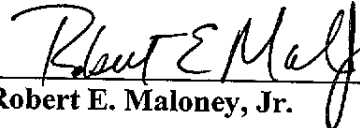
  
Notary Public

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

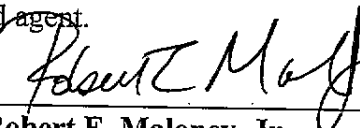
Pursuant to the provisions of Section 48.091 and 607.0502, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: **Magnolia Bluff, Inc.**
2. The name and address of the registered agent and office is:

**Robert E. Maloney, Jr., 2930 Wellington Circle South, Suite 101, Tallahassee, Florida 32308.**

  
\_\_\_\_\_  
**Robert E. Maloney, Jr.**  
DATE: 8/31/99

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.

  
\_\_\_\_\_  
**Robert E. Maloney, Jr.**  
DATE: 8/31/99

59 SEP -1 AM 11:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED