

P99000087368

Requestor's Name
Robert & Monika Newman
2030 Prince Drive
Naples, Florida 34110-1033
City/State/Zip Phone #

000003001380--9
-09/30/99--01041--012
*****87.50 *****87.50

Office Use Only

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

1. (Corporation Name) (Document #)

(Document #)

(Document #)

(Document #)

ROBERT
NEWMAN

(941) 514-2031

Photocopy

☐ Certified Copy

☐ Certificate of Status

FAP 941 514 2037

TS	Officer/Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger

OTHER FILINGS	
Annual Report	
Fictitious Name	
Name Reservation	

REGISTRATION/ QUALIFICATION	
Foreign	
Limited Partnership	
Reinstatement	
Trademark	
Other	

F. CHASSIN OCT 4 1999

Examiner's Initials

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: Ideal Marketing Group, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
2030 Prince Drive
Naples, Florida 34110

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1,000 shares.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Robert Newman
2030 Prince Drive
Naples, Florida 34110

ARTICLE V INCORPORATOR

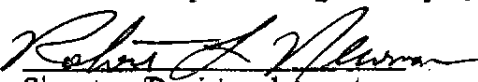
The name and address of the incorporator to these Articles of Incorporation are:

Robert Newman
2030 Prince Drive
Naples, Florida 34110


Signature/Incorporator

9/28/99
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 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

9/28/99
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 SEP 30 PM 12:14

FILED