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TRANSMITTAL LETTER

Department of State
Division of Corporations
P.O. 6327
409 E. Gaines St.
Tallahassee, FL 32314

SUBJECT: **CONCHY MO 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee Certified Copy & Certificate of Status
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ADDITIONAL COPY REQUIRED

FROM: MERRILL A. BOOKSTEIN, COUNSELOR AT LAW, P.A.
Name (Printed or typed)
2499 Glades Road, Suite 308
Address
Boca Raton, Florida 33431
City, State & Zip
(561) 361-9454
Daytime Telephone number

04 JUN 24 AM 10:43
DIVISION OF CORPORATIONS
STATE OF FLORIDA

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

CONCHY MO INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

**2499 Glades Road Suite 308
Boca Raton, FL 33431**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all activities which are lawful under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1,000 Shares at \$1.00 Par Value

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Ernest Lumpkin, - Director/President/Vice-President/Secretary/Treasurer

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

**Merrill A. Bookstein, Counselor at Law, P.A.
2499 Glades Road, Suite 308
Boca Raton, Florida 33431**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**Merrill A. Bookstein, Counselor at Law, P.A.
2499 Glades Road, Suite 308
Boca Raton, Florida 33431**

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Signature Registered Agent

Signature Incorporator

Date

Date

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STATE OF FLORIDA
DIVISION OF CORPORATIONS