

PO9000041650

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

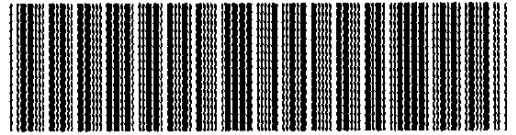
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2009 MAY 11 AM 11:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Stivers NY

COVER LETTER

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

SUBJECT: MMD Auto Transport Corporation
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Michel Cabrera
Name (Printed or typed)

11718 N 58th Apt. C
Address

Tampa FL 33617
City, State & Zip

813.375 0146
Daytime Telephone number

E-mail address: (to be used for future annual report notification)

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

MMD Auto Transport Corporation

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

Same 11718 N. 58 st. Apt C

Tampa FL 33617

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Motor vehicles

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Michel Cabrera: President
11718 N 58 st Apt: C
Tampa FL 33617

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:


Michel Cabrera
11718 N 58 st Apt: C
Tampa FL 33617

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Michel Cabrera: President.
11718 N 58 st Apt. C
Tampa FL 33617

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



Signature/Registered Agent



Signature/Incorporator

05-07-06

Date

05-07-06

Date

2009 MAY 11 AM 11:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA