P11000059666

. (Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(City/State/Zip/Filone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
<u> </u>	

Office Use Only



800209104048

06/27/11--01006--011 **78.75



80,911

COVER LETTER

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

SUBJECT: M&M Coin Laundry, Inc	0 .			
(PROPOSED CORPORA	TE NAMÉ – <u>MUST INCLUDE SUFFIX</u>)			
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:			
-	<u> </u>			
\$70.00 \$78.75	\$78.75	1		
Filing Fee Filing Fee	Filing Fee,			
& Certificate of Status	& Certified Copy Certified Cop & Certificate			
	Status	⁰¹		
	ADDITIONAL COPY REQUIRED)		
ı				
FROM: Yolanda Q Castro	(Printed or typed)			
Name	(Tritted of typed)			
249 NW 14th Street				
A	Address			
		अस्त्री }क्षा ८ क	20	
<u>Homestead, Florida 330</u>	30	y		. 45 = 1.0.
City, s	State & Zip		2011 JUN 27	s accioni
305-970-2350		*/) > 3	27	2781,000
Daytime Te	elephone number	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		- mineral
•	•		TE.	ا المام المام المام المام
yqcastro@gmail.com E-mail address: (to be used	for future annual report notification		2: 3	
E-man address: (to be used	Tot future annual report notification)	1.7		

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)

The name of the c	orporation shall be:				
ARTICLE II	PRINCIPAL OFFICE				
	Principal street address		address, if different is:		
	1949-1950 Johnson Street		Street		
J	Hollywood, Florida 33020	Homestead, F	Homestead, Florida 33030		
ARTICLE III	PURPOSE		· · · · ·		
The purpose for v	which the corporation is organized is:				
Coin Laundr	y Facility				
ARTICLE IV	SHARES				
	ures of stock is: 1000				
	INITIAL OFFICERS AND/OR DIRECT				
	itie: Yolanda Q Castro				
Address:	249 NW 14th Street		-		
	Homestead, Florida 33030				
Name and T	itle:	Name and Title:			
Address:		Address:			
Name and T	itle:	Name and Title:			
Address:					
	REGISTERED AGENT				
The <u>name and Flo</u>	orida street address (P.O. Box NOT acceptable		2011		
Name:	Yolanda Q Castro				
Address:	249 NW 14th STreet				
	Homestead, Florida 33030				
ARTICLE VII	INCORPORATOR		# 7		
	dress of the Incorporator is:		भी स्व		
Name:	Yolanda Q Castro		T . T.		
Address:	249 NW 14th Street		· · ·		
	Homestead, Florida 33030				
Havino heen nam	ed as registered agent to accept service of pro	cess for the above stated corn	₩		
	m familiar with and accept the appointment as				
	unto:		June 22, 2011		
4/7/	Required Signature/Registered Agent	.	Date		
1971					
submit this docu	ment and affirm that the facts stated herein	are true. I am aware that the	false information submitted in a		
	ment and affirm that the facts stated herein epartment of State constitutes a third degree fe				