

From:

Division of Corporations

11/05/2012 10:45:05 P.001 02

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : NATIONAL CORPORATE RESEARCH, LTD.
Account Number : I20000000088
Phone : (800) 221-0102
Fax Number : (800) 944-6607

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: cmeizinger@maximumimpact.net

FLORIDA PROFIT/NON PROFIT CORPORATION
M. Impact, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

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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: M. Impact, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address: 172 Broadway Suite 115
Woodcliff Lake, NJ 07677
Mailing address, if different is: _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
full service advertising company

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Paul Haskell / COO, CFO & Director Name and Title: _____
Address: 2 Longwood Court Address: _____
Woodcliff Lake, NJ 07677

Name and Title: Veteris Haskell / President & Director Name and Title: _____
Address: 2 Longwood Court Address: _____
Woodcliff Lake, NJ 07677

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Name: National Corporate Research, Ltd., Inc.
Address: 155 Office Plaza Drive
Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:
Name: Paul Haskell
Address: 172 Broadway Suite 115
Woodcliff Lake, NJ 07677

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

Petrona Vauk / Assist. Sec. 11/5/2012
Required Signature/Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.

Paul Haskell 11/5/2012
Required Signature/Incorporator Date

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