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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

From: Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 07535000353
Phone : (800)221-2972
Fax Number : (888)692-9256

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
CMI MARKETING RESEARCH, INC.

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

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

ARTICLE I NAME CMI MARKETING RESEARCH, INC.
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
Principal street address Mailing address, if different is:

10712 COUNTY LINE ROAD, UNITS 6&7 10712 COUNTY LINE ROAD, UNITS 6&7

HUDSON, FL 34667-6220 HUDSON, FL 34667-6220

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: _____
To conduct all activities set forth and permitted under and Florida corporation law

ARTICLE IV SHARES 200
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
Name and Title: CAROL MCMAHON, Director Name and Title: _____
Address 10712 COUNTY LINE ROAD, Units 6&7 Address: _____
HUDSON, FL 34667-6220 _____

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

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

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CMI MARKETING RESEARCH, INC.

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: CAROL MCMAHON

Address: 10712 COUNTY LINE ROAD, UNITS 6&7
HUDSON, FL 34667-6220

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: CAROL MCMAHON

Address: 10712 COUNTY LINE ROAD, UNITS 6&7
HUDSON, FL 34667-6220

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Carol McMahon
 Required Signature/Registered Agent

11/16/17
 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.

Carol McMahon
 Required Signature/Incorporator

11/16/17
 Date

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