

PAOWS3986

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

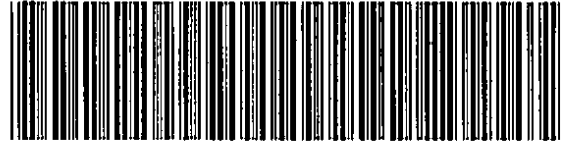
Special Instructions to Filing Officer:

Office Use Only

PAOWS3986

T. SCOTT

JUL 07 2022



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FILE AND/OR VIDEO
FRANCHISING
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2022 JUL -6 AM 8:00

FILED

COVER LETTER

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

SUBJECT: MLLM Group Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

<input type="checkbox"/> \$70.00 Filing Fee	<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certificate of Status	<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
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ADDITIONAL COPY REQUIRED

FROM: Linas Meilutis
Name (Printed or typed)

71851 Rainbow Lake Ct.
Address

Esterov, FL 33928
City, State & Zip

739-850-8767
Daytime Telephone number

linas@mdlresidential.com
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
2022 JUL -6 AM 10:30

REGISTRATION
COMMERCIAL
SERVICES

June 20, 2022

LINAS MEILUTIS
21851 RAINBOW LAKE CT.
ESTERO, FL 33928

SUBJECT: MLLM GROUP INC
Ref. Number: W22000083391

We have received your document for MLLM GROUP INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Documents not legible.,

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 122A00013798

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314



INGRAM & COMPANY, LLC
CERTIFIED PUBLIC ACCOUNTANTS

JOHN NEAL INGRAM, C.P.A.
MELISSA S. INGRAM, C.P.A.

Members
FLORIDA SOCIETY OF CERTIFIED PUBLIC ACCOUNTANTS
ALABAMA SOCIETY OF CERTIFIED PUBLIC ACCOUNTANTS
AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS

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

Re: MLLM Group Inc

Dear Sir/Madame

Attached is the notice we received concerning the Articles for the new company. We are somewhat surprised that you could not read the original documents as it is fairly clear and well written. In any case we have redone it again for your recording purposes.

Please expediate this as much as possible.

Sincerely,

A handwritten signature in black ink, appearing to read 'Neal Ingram', written over the word 'Sincerely'.

Neal Ingram
CPA

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: MLLM Group Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address: LAKE
21851 Rainbow Ct.
Estero, FL 33928

Mailing address, if different is: _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Construction Industry
primarily remodeling and new build.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Milas Meilutis - officer</u>	Name and Title:	<u>Martin D. Lunn - of</u>
Address:	<u>21851 Rainbow Lake Ct.</u> <u>Estero, FL 33928</u>	Address:	<u>21341 Lancaster Run</u> <u>Estero, FL 33928</u>

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

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

FILED
2022 JUL -6 AM 8:00
CORPORATION VIDEO
FRANCHISING
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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: Linas Meilutis
Address: 21851 Rainbow Lake Ct.
Estero, FL 33928

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: John Neal Ingram
Address: 1000 Tamiami TR. N, Ste. 503
Naples, FL 34102

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 days prior or 90 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

Required Signature/Registered Agent 6.30.22
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.

Required Signature/Incorporator 6/30/22
Date