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TALLAHASSEE FLORIDA

April 28, 2014

Department of State
New Filing Section
Division of Corporations
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Tallahassee, Florida 32314

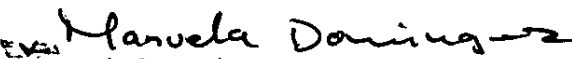
Re: P11000062390 2M INDUSTRIES CORPORATION

To whom it may concern:

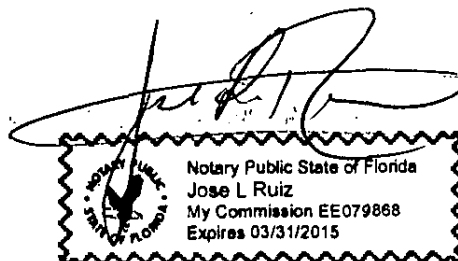
By means of this letter I am advising that I have no intentions of re-instating the above mentioned dissolved corporation.

Should you have any questions or concerns please do not hesitate to contact me.

Sincerely,


Manuela C. Dominguez

Maria Ruiz
L&M Accounting Serv.
7750 SW 117 Ave Suite 201F
Miami, FL 33183



COVER LETTER

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

SUBJECT: **2M INDUSTRIES 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: **MARIA E RUIZ**
Name (Printed or typed)
7750 SW 117TH AVE SUITE 201D
Address
MIAMI FLORIDA 33183
City, State & Zip
305 595 -2407
Daytime Telephone number
MARIAQUIROS9@HOTMAIL.COM
E-mail address: (to be used for future annual report notification)

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)

ARTICLE I NAME

The name of the corporation shall be: 2M INDUSTRIES CORPORATION

ARTICLE II PRINCIPAL OFFICE

Principal street address

18940 NW 86 AVE #3605

HIALEAH FLORIDA 33015

Mailing address, if different is:

7750 SW 117TH AVE SUITE 301D

MIAMI FLORIDA 33183

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LEGAL PURPOSES

EIN #45-2714090

ARTICLE IV SHARES

The number of shares of stock is: 100 @ \$1.00 EA

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MANUELA DOMINGUEZ, PRESIDENT

Address: 18940 NW 86 AVE #3605
HIALEAH FLORIDA 33015

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE FLORIDA
14 MAY 12 AM 10:08

(conti.)

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: MANUELA DOMINGUEZ

Address: 18940 NW 86 AVE #3605

HIALEAH FLORIDA 33015

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MANUELA C DOMINGUEZ

Address: 18940 NW 86 AVE #3605

HIALEAH FLORIDA 33015

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

Manuela Dominguez
Required Signature/Registered Agent

04/28/2014

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.

Manuela Dominguez
Required Signature/Incorporator

04/28/2014

Date

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