

TRANSMITTAL LETTER

P00000059410

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

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-06/13/00--01046--009
*****78.75 *****78.75

SUBJECT: M & M Hurricane Protection Inc.

(Proposed corporate name - must include suffix)

Enclosed is 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: Danny K. Martin
Name (Printed or typed)

5208 Misty Morn Road

Address

Palm Beach Gardens, FL 33418

City, State & Zip

561-881-5515

Daytime Telephone number

FILED
00 JUN 13 PM 6:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

KR 6/19

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 & M Hurricane Protection Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5208 Misty Morn Road
Palm Beach Gardens, FL 33418

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To prepare and install hurricane protection

ARTICLE IV SHARES

The number of shares of stock is:

200

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es):

Danny K. Martin, 5208 Misty Morn Road, Palm Beach Gardens, FL 33418
Thomas Murphy, 4920 Pine Ridge Way S.E., Stuart, FL 34997
Patrick A. Martin, 1175 Cherlynn Terrace, West Palm Beach, FL 33406

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent are:

Danny K. Martin, 5208 Misty Morn Road, Palm Beach Gardens, FL 33418

ARTICLE VII INCORPORATOR

The name and address of the Incorporator are:

Danny K. Martin, 5208 Misty Morn Road, Palm Beach Gardens, FL 33418

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



Signature/Registered Agent



Signature/Incorporator

June 9, 2000

Date

June 9, 2000

Date

FILED
00 JUN 13 PM 6:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA