

TRANSMITTAL LETTER

P01000001172

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

FILED
00 DEC 26 AM 9:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: MENJIV CORPORATION
(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: MARIA HAYDEE FLORES
Name (Printed or typed)

12970 SW 190th Street
Address

Miami, Florida 33177

City, State & Zip

305) - 634-4403

Daytime Telephone number

000003513770--2
-12/27/00--01015--021
*****87.50 *****87.50

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

R. CHESSEN JAN 4 2000

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: MENJIV CORPORATION

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 1651 NW 34th Street
Miami, Florida 33142

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 500 shares of common stock, par value of \$1.00 per share

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es): Maria Haydee Flores
12970 SW 190th Street
Miami, Florida 33177

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is: Maria Haydee Flores
12970 SW 190th Street
Miami, Florida 33177

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: Maria Haydee Flores
12970 SW 190th Street
Miami, Florida 33177

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

Maria H. Flores
Signature/Registered Agent Maria H. Flores

12-22-00
Date

Maria H. Flores
Signature/Incorporator Maria H. Flores

12-22-00
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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