TRANSMITTAL LETTER

000011061

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

SUBJECT: MA A LONG CORPORATE NAME - MUST INCLUDE SUFFIX)							
Enclosed is an origina	al and one(1) copy of the article	s of incorporation and a	check for:	,			
\$70.00	□ \$78.75	\$78.75	\$87.50				
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy				
	& Commeate of Status	·	& Certificate of				
	·	ADDITIONAL CO	Status PY REQUIRED				
FROM:	MARTINE Name (Pr	AURIL		oo , _{aya} , ,			
633 NE 1675+ Suite 304							
	North Miami b. fl. 33162 TARRESTOR						
1954) 649-1367 /954) 209-0928 TIST 7 0							
	= 27 -2		, ORID				
			>	•			

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



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 22, 2001

MARTINE AVRIL 633 NE 167 ST STE 304 NORTH MIAMI BEACH, FL 33162

SUBJECT: M & A FINANCIAL CORP. INC.

Ref. Number: W01000001533

We have received your document for M & A FINANCIAL CORP. 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please complete Article(s) VI & VII.

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address is not acceptable.

Please return the 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) 487-6928.

Tim Burch Document Specialist

Letter Number: 701A00003336

ARTICLES OF INCORPORATION In compliance with Chapter 607' and/or Chapter 621, F.S. (I	Profit)		
ARTICLE I NAME			
The name of the corporation shall be:			·- ·
MTM Financial Corp. enc.	•	T ₂	G 🗢
•		E	
ARTICLE II PRINCIPAL OFFICE		¥.	ELLE MASO ELLE
The principal place of business/mailing address is:	******	3SS	3 8 F
633 NE 167 St. SUIT 304	•	in the second	무민
North Mami B. florida 33112	•	F	g e -
	•		1: 34
ARTICLE III PURPOSE The representation is conserved in			
The purpose for which the corporation is organized is:			
lausiness			
ARTICLE IV SHARES		-	
The number of shares of stock is:		·	
<u> </u>	•		
ARTICLE V INITIAL OFFICERS DIRECTORS	(optional)		
The name(s) and address(es):	<u> </u>		
MARVIN AURIL			
MARIO AURIL			
	•		
	•		
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agen	,	-	
_	ir 15.		,
Gabriel Stean			
633 NE 167 St Suite 304			
N. M. Beach Fl. 33162			
ARTICLE VII INCORPORATOR			-
The name and address of the Incorporator is:		-	•
633 NE 167 St S. 304			
N.M B. fl 33162			
	•		

Having been named as registered agent to accept service of process for certificate, I am familiar with and accept the appointment as registered to			gnated in this
constitute, I pin jointum min una accept the appointment as registered t	igem unu ugree w uc	ь нь ты сирисну	
Il deet /		1-16-01	· var nerre weren
Signature Registered Agent	nam nina ya ma	Date	enter the test of
	<u>=</u> ,	· 	
Hastine Ala		1-16-01	**************************************
Signature/Incorporator		Date	and the second
Durane Wind hormon			