POLOGOOT 9865

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

Enclosed is an original and one(1) copy of the articles of incorporation and a check for	08/09/0101055U23 *****78.75 *****78.75
Enclosed is an original and one(1) copy of the articles of incorporation and a check for the second	08/09/0101055U23 *****78.75 *****78.75
D \$70.00 D \$70.00	or:
□ \$70.00 □ \$78.75 □ \$78.75	
Filing Fee Filing Fee Filing Fee Filing & Certificate of Status & Certified Copy Certified Copy	7.50 g Fee, fied Copy ertificate of
ADDITIONAL COPY REC	
FROM: V. Balletto & Associates, Inc. Name (Printed or typed)	
3956 Town Center Blvd., #165	
Address	
Orlando, FL 32837	
City, State & Zip 407-248-9877 Daytime Telephone number	OI AUG-9 PH

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

0x 8/14

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

S & M MANAGEMENT ENTERPRISES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business of this corporation shall be:

116 CORNWALLIS DRIVE DAVENPORT, FL 33837 OI AUG -9 PM 12: 54
SECRETARY OF STATE
AND ANASSEF, FLORID

and the mailing address of this corporation shall be:

116 CORNWALLIS DRIVE DAVENPORT, FL 33837

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

SHERIF MOHAMED 116 CORNWALLIS DRIVE DAVENPORT, FL 33837

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

SHERIF MOHAMED 116 CORNWALLIS DRIVE DAVENPORT, FL 33837

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 6th day of AUGUST, 2001.

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V	Signature				, 4-2-
	Signature		 . .	- 0.	-
	Signature		 _		१ - भ्यू ल्या

NOTARIZATION IS NOT REQUIRED

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the corporation is: **S&M MANAGEMENT ENTERPRISES, INC.**
- 2. The name and address of the registered agent and office is:

SHERIF MOHAMED

(NAME)

116 CORNWALLIS DRIVE

(P.O. Box or Mail Drop Box NOT Acceptable)

DAVENPORT, FL 33837

(City/State/Zip)

OI AUG -9 PH 12: 54
SECRETARY OF STATE
TALLAHASSEE. FLORID

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 property and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Sionature)

AUGUST 6, 2001

(Date)