TRANSMITTAL LETTER

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

SUBJECT: Enclosed is an original	(PROPOSED CORPORA) al and one(1) copy of the article	TE NAME - MUST INCL	UDE SUFFIX) HASSEE, F	FILED 01 0CT 2/5 PM 3: 5
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	53
FROM: Maria R. Costa Name (Printed or typed) 8726 N.W. 119th Street, Bldg. #8 Address Hialeah Gardens, Fla. 33018				
	City, S (305) 828 -	1016 2075 ephone number	000465351 -10/25/0101065	17 002 ⊭*87.50

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

Ps/0/26/9-

In compliance with Chapter 607 and/or Chapter 621, F.S. (Pro	ofit) FILED
ARTICLE I NAME	01 OCT 25 PM 3: 53
The name of the corporation shall be:	
M2 Engineering, Corporation	SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE	. 50 · · · · · · · · · · · · · · · · · ·
The principal place of business/mailing address is:	area.
8726 N.W. 119th Street, Bldg.#	78
Hialeah Gardens, Fla. 33018	
The purpose for which the corporation is organized is:	
Compose for which the corporation is organized is:	•
Professional Corporation	
ARTICLE IV SHARES	
The number of shares of stock is:	· ·
) SWAKE	
ARTICLE V INITIAL OFFICERS/DIRECTORS (or	otional)
The name(s), address(es) and title(s):	•
Maria Posa Costa (Preside	n+)
·	
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is	
	:
Maria Rosa Costa 14424 N.W. 802 Place	
Miami Lakes, Fla. 38018	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Maria Rosa Costa	
14424 N.W. 872 Place	
Miami Lakes, Fla. 33018	
**************************************	there are not all the same and
certificate I am familiar with and accept the appointment as registered agent	t and agree to act in this capacity
Miller Took of to	الماماء
Signature/Registered Agent	
	,
Signature/Incorporator	10 8 0 Date

Date