

P01000117424

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

400004715444--4  
-12/10/01--01029--024  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: Mike RYAN and Associates Incorporated  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: THOMAS M. RYAN  
Name (Printed or typed)

5312 Laurel Pointe Dr  
Address

Valrico, FL 33594  
City, State & Zip

813-651-1321  
Daytime Telephone number

Thomas M. Ryan GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT Art. 1  
DATE 12-12-01  
DOC. EXAM WC

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

FILED  
01 DEC 10 AM 7:19  
SECRETARY OF STATE  
TALLAHASSEE, FL 32304

215-6473  
428-4145

12-12-01  
WC

# 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:

Mike Ryan and Associates, Incorporated

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

5312 Laurel Pointe Dr  
Valrico, FL 33594

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide advice, analysis, solutions and other consulting  
recommendations to Department of Defense and other U.S. government  
contracting companies and Manufacturers

## ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Thomas M. Ryan, President

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Thomas M. Ryan  
5312 Laurel Pointe Dr  
Valrico, FL 33594

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Thomas M. Ryan  
5312 Laurel Pointe Dr  
Valrico, FL 33594

\*\*\*\*\*  
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

Thomas M. Ryan

Signature/Registered Agent

4 Dec '01

Date

Thomas M. Ryan

Signature/Incorporator

4 Dec '01

Date

FILED  
01 DEC 10 AM 7:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA