

TRANSMITTAL LETTER

PO2000045313

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

FILED
2002 APR 25 PM 12:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: MSM & Associates, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

200005347822--6
-04/25/02--01041--023
*****78.75 *****78.75

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: William C. Boyles
Name (Printed or typed)

687 OAKWAY
Address

Sanford FL 32773
City, State & Zip

407-321-8393
Daytime Telephone number

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

bc 4/25'

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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ARTICLE I NAME

The name of the corporation shall be:

MSM & Associates, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

687 OAKWAY
Sanford, FLORIDA, 32773

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

WILLIAM C. Boyles (pres.)
687 OAKWAY
Sanford, Florida 32773

ARTICLE VI REGISTERED AGENT

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

WILLIAM C. Boyles
687 OAKWAY
Sanford, Florida 32773

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

WILLIAM C. Boyles
687 OAKWAY
Sanford, FLORIDA 32773

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


Signature/Registered Agent

4-16-02
Date


Signature/Incorporator

4-16-02
Date