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Division of Corporations  
Fax Number : (850) 205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305) 599-0839  
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**FLORIDA PROFIT CORPORATION OR P.A.**

**M. & MENDOZA ASSOCIATES, INC.**

Certificate of Status	0
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FLORIDA DEPARTMENT OF STATE

Jim Smith  
Secretary of State

November 6, 2002

FAS-T

SUBJECT: M. & MENDOZA ASSOCIATES, INC.  
REF: W02000031815

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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FAX Aud. #: H02000221948  
Letter Number: 402A00060641

**ARTICLES OF INCORPORATION  
OF  
M. & MENDOZA ASSOCIATES, INC.**

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

**ARTICLE I NAME**

The name of the corporation shall be: **M. & MENDOZA ASSOCIATES, INC.**

The principal place of business of this corporation shall be:

**18725 S.W. 357<sup>TH</sup> STREET  
FLORIDA CITY, FLORIDA 33034**

**ARTICLE II NATURE OF BUSINESS**

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

**ARTICLE III CAPITAL STOCK**

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: **100 SHARES AT 1.00 PAR VALUE.**

**ARTICLE IV TERM OF EXISTENCE**

This corporation is to exist perpetually:

PREPARED BY: **ALFONSO RODRIGUEZ, C.F.A.**  
**6780 CORAL WAY SUITE 100**  
**MIAMI, FLORIDA 33155**  
**TEL. (305) 662-1824**  
**FAX: (305) 662-1463**

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**TALLAHASSEE, FLORIDA**

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) selected, is (are):

ROBERTO MENDOZA, PRES/TREAS.  
18725 S.W. 357<sup>TH</sup> STREET  
FLORIDA CITY, FLORIDA 33034

JACQUELINE MENDOZA, VP/SECT.  
18725 S.W. 357<sup>TH</sup> STREET  
FLORIDA CITY, FLORIDA 33034

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of Incorporation is:

ROBERTO MENDOZA, PRES/TREAS.  
18725 S.W. 357<sup>TH</sup> STREET  
FLORIDA CITY, FLORIDA 33034

JACQUELINE MENDOZA, VP/SECT.  
18725 S.W. 357<sup>TH</sup> STREET  
FLORIDA CITY, FLORIDA 33034

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation THIS 22<sup>ND</sup> DAY OF OCTOBER 2002.

Signature(s) of Incorporator(s)

✓ Roberto Mendoza  
✓ Jacqueline Mendoza

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, 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: **M. & MENDOZA ASSOCIATES, INC.**

2. The name and address of the registered agent and Office:

**ROBERTO MENDOZA, PRES/TREAS.  
18725 S.W. 357<sup>TH</sup> STREET  
FLORIDA CITY, FLORIDA 33034**

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Signature: *Roberto Mendoza*

(corporate officer)

Title:

PRES/TREAS.

Date:

OCTOBER 22<sup>ND</sup> 2002.

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE *Roberto Mendoza*

DATE *10/22/02*

REGISTERED AGENT FILING FEE: