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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

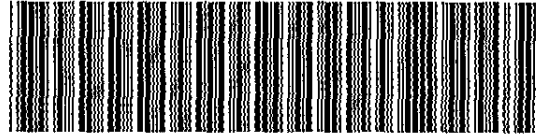
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 OCT 31 AM 10:20

F. CHESSER NOV 6

50317 60555

TRANSMITTAL LETTER

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

SUBJECT: M & M GROUP HOME INC.
(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: MARIE CHRISPONTE
Name (Printed or typed)

121 NE 195 ST
Address

N. M. B. FL 33179
City, State & Zip

(305) 652-5694
Daytime Telephone number

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

ARTICLES OF INCORPORATION

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

FILED
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
03 OCT 31 AM 10:20

ARTICLE I NAME

The name of the corporation shall be:

M & M GROUP HOME, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

121 NE 195 ST
N. Miami Bk, FL 33179

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE CARE FOR MENTALLY CHALLENGED INDIVIDUALS

ARTICLE IV SHARES

The number of shares of stock is: ONE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

MARIE CHRISPONTE, DIRECTOR - 121 NE 195 ST, NMB, FL
MAXENE FONTIL, OFFICER - 2230 WASHINGTON ST, HOLLYWOOD,
330

ARTICLE VI REGISTERED AGENT

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

MARIE CHRISPONTE 121 NE 195 ST, NMB, FL 33179

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARIE CHRISPONTE 121 NE 195 ST NMB, FL 33179

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

Marie Chrisponte
Signature/Registered Agent

10-24-03
Date

Marie Chrisponte
Signature/Incorporator

10-24-03
Date