

PO4000026417

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## TRANSMITTAL LETTER

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

SUBJECT: MGF MANAGEMENT, 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: IVAN L. FELSEN  
Name (Printed or typed)

1800 SURFSIDE DRIVE  
Address

FT. PIERCE, FL 34949  
City, State & Zip

(772) 633-8835  
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)

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**ARTICLE I NAME**

The name of the corporation shall be:

MGF MANAGEMENT, INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

1800 SURFSIDE DRIVE  
FT. PIERCE, FL 34949

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ALL BUSINESS WHICH CAN  
BE LEGALLY TRANSACTED.

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

MINDY G. FELSEN, PRESIDENT, DIRECTOR:  
1800 SURFSIDE DRIVE  
FT. PIERCE, FL 34949

**ARTICLE VI REGISTERED AGENT**

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

IVAN FELSEN  
1800 SURFSIDE DRIVE  
FT. PIERCE, FL 34949

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

IVAN FELSEN  
1800 SURFSIDE DRIVE  
FT. PIERCE, FL 34949

\*\*\*\*\*

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

Ivan L. Felsen

Signature/Registered Agent

1/28/04

Date

Ivan L. Felsen

Signature/Incorporator

1/28/04

Date