

P040000068101

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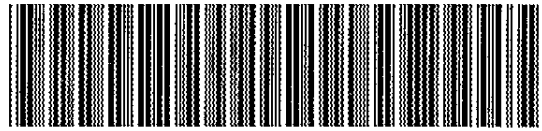
(Business Entity Name)

(Document Number)

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## TRANSMITTAL LETTER

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

SUBJECT: Hmmp INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

ADDITIONAL COPY REQUIRED

FROM: DR. JOSEPH DELLA-GIUSTINA  
Name (Printed or typed)

400 SEASPRAY AVE.  
Address

PALE BEACH FL. 33480  
City, State & Zip

561-820-8551 or 561-762-4960  
Daytime Telephone number

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

ARTICLES OF INCORPORATION  
OF  
HMMP INC.

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ARTICLE I- NAME AND ADDRESS

THE NAME OF THIS CORPORATION IS HMMP INC. THE ADDRESS OF THIS CORPORATION IS 9851 NORTHWEST 13<sup>TH</sup> COURT, CORAL SPRINGS, FLORIDA 33071.

ARTICLE II- DURATION

THIS CORPORATION SHALL HAVE A PERPETUAL EXSISTENCE COMMENCING ON THE DATE OF EXECUTION AND ACKNOWLEDGEMENT OF THESE ARTICLES.

ARTICLE III-PURPOSE

THIS CORPORATION IS ORGANIZED FOR THE PURPOSE OF TRANSACTING ANY AND ALL LAWFUL BUSINESS.

ARTICLE IV-CAPITAL STOCK

THIS CORPORATION ID AUTHORIZED TO ISSUE 500 SHARES OF COMMON STOCK OF A PAR VALUE OF \$5.00 PER SHARE.

ARTICLE V-INTIAL REGISTERED AGENT

THE STREET ADDRESS OF THE INTIAL REGISTERED OFFICE OF THIS CORPORATION IS HMMP INC. 9851 NORTHWEST 13<sup>TH</sup> COURT, CORAL SPRINGS, FLORIDA 33071. THE NAME OF THE REGISTERED AGENT IS HERBERT W. PELZER OF 9851 NORTHWEST 13<sup>TH</sup> COURT, CORAL SPRINGS, FLORIDA 33071.

ARTICLE VI- INTIAL CORPORATION CAPITAL

THE INTIAL CAPITAL WITH WHICH THIS CORPORATION SHALL BEGIN BUSINESS IS TEN THOUSAND DOLLARS (\$1000.00).

ARTICLE VII-INTIAL BOARD OF DIRECTORS

THIS CORPORATION SHALL HAVE TWO DIRECTORS INITIALLY. THE NUMBER OF DIRECTORS MAY BE INCREASED FROM TIME TO TIME BY THE BYLAWS, BUT SHALL NEVER BE LESS THAN ONE. THE NAME AND ADDRESS OF THE DIRECTORS OF THIS CORPORATION ARE; HERBERT W.

PELZER AND MARY C. PELZER OF 9851 N.W. 13<sup>TH</sup> COURT, CORAL SPRINGS,  
FL. 33071..

ARTICLE VIII-BYLAWS

THE POWER TO ADOPT, ALTER, AMEND OR REPEAL BY-LAWS SHALL BE  
VESTED IN THE DIRECTORS. OWNERSHIP OF STOCK IN THIS CORPORATION  
SHALL NOT BE A CONDITION PROCEEDING MEMBERSHIP ON THE BOARD  
OF DIRECTORS, OF TO THE ELECTION AS AN OFFICER OF THE  
CORPORATION.

ARTICLE IX-INITIAL OFFICERS

THE INITIAL PRESIDENT AND TREASURER IS HERBERT W. PELZER AND  
VICE-PRES. AND SECRETARY IS MARY C. PELZER BOTH OF 9851 N.W.13<sup>TH</sup>  
COURT, CORAL SPRINGS , FL. 33071.

ARTICLE X-INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS HERBERT W. PELZER  
OF 9851 N.W. 13<sup>TH</sup> COURT, CORAL SPRINGS, FLORIDA 33071.

ARTICLE XI-AMENDMENT

THIS CORPORATION RESERVES THE RIGHT TO AMEND OR REPEAL ANY  
PROVISION CONTAINED IN THESE ARTICLES OF INCORPORATION OR ANY  
AMMENDMENT HERETO.

IN WITNESS WHEREOF, THE UNDERSIGNED INCORPORATOR HAS ~~MARCH~~ <sup>APRIL (11/10)</sup>  
EXECUTED THESE ARTICLES OF INCORPORATION THE 1ST DAY OF ~~MARCH~~  
2004.

  
HERBERT W. PELZER

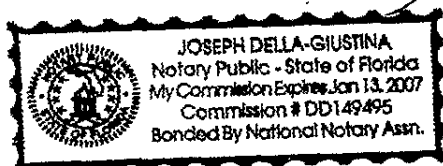
STATE OF FLORIDA  
COUNTY OF PALM BEACH

BEFORE ME, A NOTARY PUBLIC AUTHORIZED TO TAKE  
ACKNOWLEDGMENTS IN THE STATE AND COUNTY SET FORTH ABOVE,  
PERSONALLY APPEARED HERBERT W. PELZER KNOWN TO ME AND KNOWN  
BY ME TO BE THE PERSON WHO EXECUTED THE FOREGOING ARTICLES OF  
INCORPORATION, AND SHE ACKNOWLEDGED BEFORE ME THAT SHE  
EXECUTED THESE ARTICLES OF INCORPORATION.

IN WITNESS WHEREOF, I HAVE HERETO SET MY HAND AND AFFIXED  
MY OFFICIAL SEAL IN THE STATE AND COUNTY AFORESAID, THIS 1ST DAY  
OF ~~MARCH~~ 2004.

~~MARCH~~ <sup>APRIL</sup>

  
NOTARY PUBLIC



REGISTERED AGENT

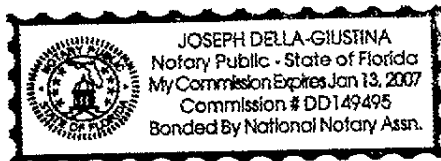
HAVING BEEN NAMED REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR HMMP INC.. AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES AND AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS A REGISTERED AGENT.

*(Signature)*  
~~MARCH 1, 2004~~  
APRIL 1, 2004

*(Signature)*  
HERBERT W. PELZER

STATE OF FLORIDA  
PALM BEACH COUNTY

I CERTIFY THAT ON ~~MARCH~~ <sup>APRIL</sup> 1, 2004 HERBERT W. PELZER PERSONALLY APPEARED BEFORE ME AND ACKNOWLEDGED THAT HE EXECUTED THE FOREGOING ARTICLES OF INCORPORATION AND CERTIFICATE OF REGISTERED AGENT.



*(Signature)*  
NOTARY PUBLIC

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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