

P04000157359

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

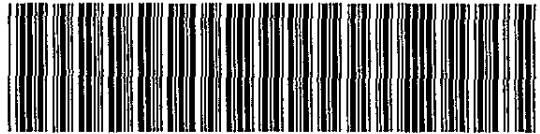
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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11-18

TRANSMITTAL LETTER

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

SUBJECT: Meyer Financial Group, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Eric Meyer

Name (Printed or typed)

19477 NE 10th Ave, Suite 308

Address

Miami, FL 33179

City, State & Zip

305-652-2132

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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)

ARTICLE I NAME

The name of the corporation shall be:

Meyer Financial Group, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

19477 NE 10th Ave
Suite 308
Miami, FL 33179

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Introducing Broker

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Eric Meyer, President
19477 NE 10th Ave
Suite 308
Miami, FL 33179

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Eric Meyer
19477 NE 10th Ave
Suite 308
Miami, FL 33179

ARTICLE VII INCORPORATOR

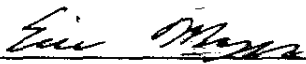
The name and address of the Incorporator is:

Eric Meyer
19477 NE 10th Ave, Suite 308
Miami, 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



Signature/Registered Agent



Signature/Incorporator



Date



Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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