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OF DEC 30 PM 2: 45

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TRANSMITTAL LETTER

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

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NAME – MUST INCL! of incorporation and	
S78.75 Filing Fee & Certified Copy ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
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102 TER	<u>R. </u>
	of incorporation and \$78.75 Filing Fee & Certified Copy ADDITIONAL CO

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

December 30, 2004

MARIA SARDON 13928 S.W. 102 TERRACE MIAMI, FL 33186

SUBJECT: JM & M ASSOCIATES INC.

Ref. Number: W04000047571

We have received your document for JM & M ASSOCIATES INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The articles of incorporation must be prepared in compliance with section 607.0202, Florida Statutes. Please refer to this section of the law.

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2005 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Letter Number: 104A00072148

Suzanne Hawkes Document Specialist New Filings Section

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) NAME ARTICLE I JM + M associates The name of the corporation shall be: 13928 S.W. 102nd terr. Miami Fla. 33186 ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: ARTICLE III **PURPOSE** The purpose for which the corporation is organized is: Any and all Lawful business ARTICLE IV The number of shares of stock is: 10 INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Maria Sardon 13928 S.W 102Terr Miami, FLa. 33189 Ŋ REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: The name and address of the Incorporator is: 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