

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H05000044637 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)205-0381

From:

Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
Phone : (800)494-3124
Fax Number : (305)675-2811

FLORIDA PROFIT CORPORATION OR P.A.

MIKE THOMPSON ENTERPRISES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 FEB 22 PM 1:20

Electronic Filing Menu

Corporate Filing

Public Access Help

BM 2/23

H050000446373

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

MIKE THOMPSON ENTERPRISES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is

839 SW MUNJACK CIRCLE

PORT ST. LUCIE, FL 34986

ARTICLE III PURPOSE

The purpose for which the corporation is organized :

The corporation may engage in any activity or business permitted under the laws of the State of Florida

ARTICLE IV SHARES

The number of shares of stock

1500 COMMON SHARES

ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is:

Director, President

MIKE THOMPSON

839 SW MUNJACK CIRCLE

PORT ST. LUCIE, FL 34986

ARTICLE VI REGISTERED AGENT

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

MIKE THOMPSON

839 SW MUNJACK CIRCLE

PORT ST. LUCIE, FL 34986

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 FEB 22 PM 1:20

H050000446373

H050000446373

PAGE 2 MIKE THOMPSON ENTERPRISES, INC.

ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

MIKE THOMPSON
839 SW MUNJACK CIRCLE
PORT ST. LUCIE, FL 34988

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.

MT
Signature / Registered Agent

2/1/05
Date

MT
Signature/Incorporator

2/1/05
Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 FEB 22 PM 1:20

H050000446373