

P06000031780

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

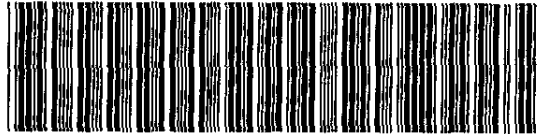
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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06 MAR -1 AM 8:12  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

6 11 11

1/4

## COVER LETTER

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

SUBJECT: M&T Sharp Edge, 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: Tami Steinlage  
Name (Printed or typed)

5340 North Federal Highway #104  
Address

Lighthouse Point, FL 33064  
City, State & Zip

954. 873. 7670  
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)

FILED

## ARTICLE I NAME

The name of the corporation shall be:

MET Sharp Edge, Inc.

06 MAR -1 AM 8:12

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5340 North Federal Highway  
suite 104  
Lighthouse Point, FL 33064

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Home improvement company

## 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):

Tami Steinlage, President  
5340 North Federal Highway suite 104  
Lighthouse Point, FL 33064

## ARTICLE VI REGISTERED AGENT

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

Shan T. Lennon, Esq.  
525 NE 36th St.  
Boca Raton, FL 33431

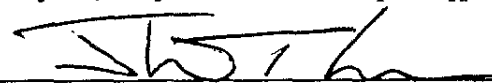
## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Tami Steinlage  
5340 North Federal Highway - suite 104  
Lighthouse Point, FL 33064

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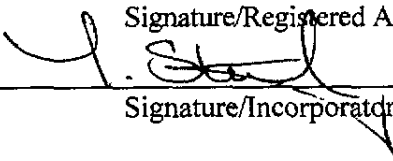
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

2/18/06

Date



Signature/Incorporator

2/18/06

Date