

PO6000104753

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

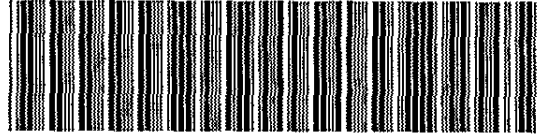
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000078489060

08/09/06--01010--003 **78.75

FILED

05 AUG -9 PM 12:22

SECRETARY
TALLER
10/10/07

Da

COVER LETTER

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

SUBJECT: MAMB Enterprises, 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: Melony Fischer
Name (Printed or typed)

2805 NW 45 Street
Address

Boca Raton, Florida 33434
City, State & Zip

561-654-4626
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)

ARTICLE I NAME

The name of the corporation shall be:

MAMB Enterprises, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2805 NW 45 Street Boca Raton, FL 33434

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Accounting Services and Investments

ARTICLE IV SHARES

The number of shares of stock is:

one

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Melony Fischer - President & Director

2805 NW 45 Street

Boca Raton, FL 33434

ARTICLE VI REGISTERED AGENT

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

Melony Fischer

2805 NW 45 Street

Boca Raton, FL 33434

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Melony Fischer

2805 NW 45 Street

Boca Raton, FL 33434

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

Melony Fischer
Signature/Registered Agent

Melony Fischer
Signature/Incorporator

8/7/06
Date

8/7/06
Date

FILED
08 AUG -9 PM 12:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA