

PO6000131233

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

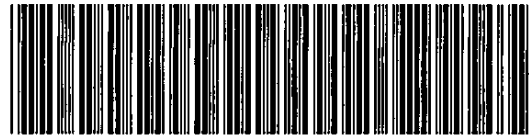
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SEAL OF THE STATE
TALLAHASSEE, FLORIDA

10/16
SPK

COVER LETTER

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

SUBJECT: CMVB ACQUISITION CORP.

(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: PAUL PRICE

Name (Printed or typed)

238 NE First Ave

Address

DELRAY BEACH FL 33444

City, State & Zip

(561) 909-9638

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:

CMVB ACQUISITION CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

605 SE FIRST AVENUE, STE. F, DELRAY BEACH FL 33444

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL PURPOSES FOR WHICH FLORIDA CORPORATIONS MAY BE FORMED.

ARTICLE IV SHARES

The number of shares of stock is:

10,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

PAUL PRICE, director, president, secretary and treasurer

ARTICLE VI REGISTERED AGENT

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

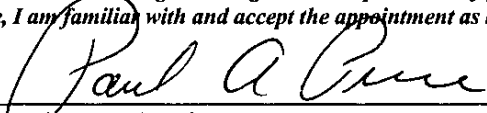
Paul Price, 238 NE First Avenue, Delray Beach FL 33444

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Paul Price, 238 NE First Avenue, Delray Beach FL 33444

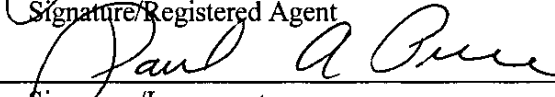
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

10/11/2006

Date



Signature/Incorporator

10/11/2006

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA