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SECRETARY OF STATE
TALL AHASSEE FINALE

COVER LETTER

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

SUBJECT: _	ME	·U	Assoc	iate	. In	terna	Hiona	1 _	tnc.
_		(P	ROPOSED CO	PRPORATE	NAME – M	UST INCLUE	E SUFFIX)	-,	
						, ,	•		

inclosed are all original and one (1) copy of the arti	cies of incorporation and	i a check for.
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED

FROM: URSULA MCLAWRENCE	· ;
Name (Printed or typed)	
1916 SW 27th TERRACE	
Address	
CAPE CORAL, FL 33914	
	`\
239 - 440 - 2650 Daytime Telephone number	
Daytime reseptions 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: M&U ASSOCIATE International In	ıC
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 3015 NW PINE ISLAND Road StE.#1/3-4/8 CAPE CORAL, FL 3399, ARTICLE III PURPOSE	1
The purpose for which the corporation is organized is: to import & Export with the United States and outside the United States, I clothing and any other Legal business practices.	the gor
AKTICLE IV SHAKES	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): URSULA MLAWRENCE 1916 SW274 TERRACE CAPE CORAL, FL 33914 PRESIDENT ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:	
URSULA MILAWRENCE 1916 SW 27 HTERRACE CAPE CORAL, FL 33914 ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
URSULA MULAWRENCE 1916 SW 27th TERRACE CAPE CORAL, FL 33914 ************************************	
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in the certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	is
Signature/Registered Agent Date Signature Maullina 3-21-07	
Signature/Incorporator Date	