

PO700092139

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

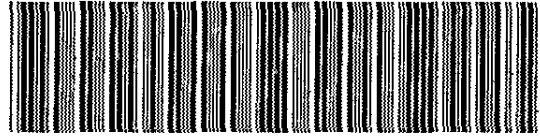
(Business Entity Name)

(Document Number)

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

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COVER LETTER

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

SUBJECT: MEM Companies, Incorporated  
(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: Mary Maskal  
Name (Printed or typed)

5301 Gulf Blvd., B507  
Address

St. Pete Beach, FL 33706  
City, State & Zip

727 360-0888  
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:

MEM Companies, Incorporated

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5301 Gulf Blvd., B507  
St. Pete Beach, FL 33706

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Cookbook publishing and sales of products  
from direct marketing companies

## 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):

Mary Maskal, CEO  
5301 Gulf Blvd., B507  
St. Pete Beach, FL 33706

## ARTICLE VI REGISTERED AGENT

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

Mary Maskal  
5301 Gulf Blvd., B507  
St. Pete Beach, FL 33706


## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Mary Maskal  
5301 Gulf Blvd., B507  
St. Pete Beach, FL 33706

\*\*\*\*\*

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

8/10/07  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

8/10/07  
\_\_\_\_\_  
Date

07 AUG 15 PM 4:30  
SECRETARY OF STATE  
TALLAHASSEE, FL 32309

FILED