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| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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DIVISION OF CONFORMIONS

M08-18825- 4-100

J. BRYAN

APR 24 2008

EXAMINER

COVER LETTER

| TO: Registration S Division of Co | | | |
|--|--|--|---|
| SUBJECT: | (Name of Resultin | EHERUS g Florida Profit Corporation | as Inc. |
| | | · · · · · · · · · · · · · · · · · · · | and fees are submitted to tion" in accordance with s. |
| Please return all corre | espondence concerning | g this matter to: | |
| Mascia MM E | (Contact Person) Herose (Firm/Company) | s Inc | 08 APR 22 PM |
| <u>632 Su</u> | Chory H (Address) | ill Rd | ± ₩ € |
| Post Sain | City, State and Zip Code) | 1 34953 | |
| For further information | on concerning this man | tter, please call: | |
| (Name of Cor | Mason ntact Person) | at (454) 2 (Area Code and Day | 92-5616 ytime Telephone Number) |
| Enclosed is a check f | or the following amou | nt: | |
| \$105.00 Filing Fees | \$113.75 Filing Fees and Certificate of Status | \$113.75 Filing Fees and Certified Copy | \$122.50 Filing Fees, Certified Copy, and Certificate of Status |
| STREET ADDRESS | S: | MAILING A | ADDRESS: |
| Registration Section Division of Corporati Clifton Building 2661 Executive Cent Tallahassee, FL 3230 | er Circle | Registration S Division of C P. O. Box 633 Tallahassee, I | Corporations 27 |



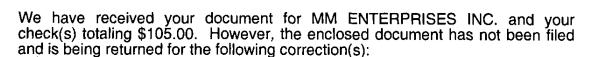
FLORIDA DEPARTMENT OF STATE Division of Corporations

April 14, 2008

MARCIA MASON MM ENTERPRISES 532 SW CHERRY HILL RD PORT SAINT LUCIE, FL 34953

SUBJECT: MM ENTERPRISES INC.

Ref. Number: W08000018852



The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is M & M ENTERPRISES INC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Regulatory Specialist II OS APR 22 PM 3 VS

Letter Number: 508A00021924

Certificate of Conversion For "Other Business Entity" Into Florida Profit Corporation



This Certificate of Conversion <u>and attached Articles of Incorporation</u> are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

| 1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is: |
|---|
| MH Enterprises # G04201700107. (Enter Name of Other Business Entity) |
| (Enter Name of Other Business Entity) |
| 2. The "Other Business Entity" is a Sole Proprietorship, sole proprietorship, general partnership, common law or business trust, etc.) |
| first organized, formed or incorporated under the laws of Flocida (Enter state, or if a non-U.S. entity, the name of the country) |
| on 7 19 2004 (Enter date "Other Business Entity" was first organized, formed or incorporated) |
| 3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under th laws of which it is now organized, formed or incorporated: |
| Morida |
| 4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of</u> <u>Incorporation:</u> |
| MM Enterprise Services Inc. |
| (Enter Name of Florida Profit Corporation) |

| 5. If not effective on the date of filing, enter the effective date: |
|---|
| (The effective date: 1) cannot be prior to nor more than 90 days after the date this |
| document is filed by the Florida Department of State; AND 2) must be the same as the |
| effective date listed in the attached Articles of Incorporation, if an effective date is listed |
| therein.) |
| |
| Signed this |
| Signed this |
| • |
| Signature: Marcia Marcon |
| |
| (Must be signed by a Chairman, Vice Chairman, Director, Officer, or, if Directors or |
| Officers have not been selected, an Incorporator.) |
| |
| Printed Name: Maccia Mason Title: President |
| Printed Name: 1 1106 CIG 1 100011 Title: 100010 CIG 1 |

Fees:

Certificate of Conversion: \$35.00

Fees for Florida Articles of Incorporation: \$70.00

Certified Copy: Certificate of Status: \$8.75 (Optional) \$8.75 (Optional)

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corporation shall be: MM Eatherprises Services Inc.

The principal place of business/mailing address is: 532 Sw cherry Hill Rd Port Saint Lucie M 34953

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Professional Corporation

ARTICLE IV

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Maccia Mason

REGISTERED AGENT

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

Marcia Mason 532 Sw Cherry Hill Rd port Saint Lucie H 34953

| <u>ARTICLE VII INCORPORATOR</u> | |
|---|---|
| The <u>name and address</u> of the Incorporator is: | |
| marcia Mason | |
| 532 Sw Cherry Hel Rd | |
| 532 Sw Cherry HU Rd Port sount 2000 Fr 34953 | |
| ************ | ******** |
| Having been named as registered agent to accept service of process for a designated in this certificate, I am familiar with and accept the appointment capacity | the above stated corporation at the place as registered agent and agree to act in this |
| Marcia Mason | 4/7/08 |
| Signature/Registered Agent | Date |
| Maria Maron | 4/7/08 |
| Signature/Incorporator | Date |

ON APR 22 PM 3- NO