

POS 0000 948/3

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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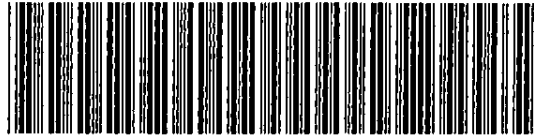
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/17/08--01005--003 **78.75

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RECEIVED DEPT OF REVENUE
TOLSONVILLE, TENNESSEE

PA

COVER LETTER

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

SUBJECT: MMA Operations, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Michael P. Phelan
Name (Printed or typed)

6861 SW 196th Ave, Bldg 200
Address

Ft. Lauderdale, FL 33332
City, State & Zip

954-252-1560
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:

MMA Operations, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

6861 SW 196th Ave, Bldg 200
Ft. Lauderdale, FL 33332

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Wholesale and Retail Business

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):

Michael Moecker, CEO
Donald Kaplan, President
Michael Phelan, Exec Vice-President
Philip Von Kahle, Vice-President

ARTICLE VI REGISTERED AGENT

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

Michael Phelan
6861 SW 196th Ave, Bldg 200
Ft. Lauderdale, FL 33332

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael Phelan
6861 SW 196th Ave, Bldg 200
Ft. Lauderdale, FL 33332

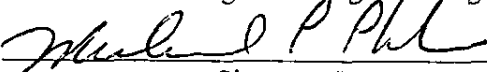
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

10/15/08

Date



Signature/Incorporator

10/15/08

Date

FILED
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CLERK OF DISTRICT COURT
FLORIDA
NASSAU COUNTY