

P09000001936

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

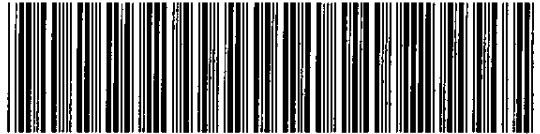
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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12/11/08--01028--011 **78.75

FILED
09 JAN -8 PM 3:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
1/9/09

1108-55301

COVER LETTER

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

SUBJECT: MCMK, 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: MURAT CAKMAK
Name (Printed or typed)

PO BOX 6459
Address

DELRAY BEACH, FL 33482
City, State & Zip

561-541-5431
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



RECEIVED
DEPARTMENT OF STATE
09 JAN -8 PM 4:05

FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 12, 2008

MURAT CAKMAK
PO BOX 6459
DELRAY BEACH, FL 33482

SUBJECT: MCMK, INC.
Ref. Number: W08000055301

We have received your document for MCMK, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

An effective date may be added to the Articles of Incorporation **if a 2009 date is needed**, otherwise the date of receipt will be the file date. **A separate article must be added to the Articles of Incorporation for the effective date.**

Please return the corrected original and one copy of 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) 245-6879.

Ruby Dunlap
Regulatory Specialist II
New Filing Section

Letter Number: 908A00060242

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:

MCMK GROUP, INC.

ARTICLE II PRINCIPAL OFFICE

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

MAILING ADDRESS: PO BOX 6459 DELRAY BEACH, FL. 33482

STREET ADDRESS 310 LAKE SHORE DRIVE APT 18 LAKE PARK, FL. 33403

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

STARTED NEW 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):

MURAT CAKMAK PRESIDENT

PO BOX 6459

DELRAY BEACH, FL. 33482

ARTICLE VI REGISTERED AGENT

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

MURAT CAKMAK

310 LAKE SHORE DRIVE APT 18 LAKE PARK, FL. 33403

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

MURAT CAKMAK PRESIDENT

PO BOX 6459

DELRAY BEACH, FL. 33482

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

1-5-09
Date



Signature/Incorporator

1-5-09
Date

FILED
09 JAN -8 PM 3:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA