# P09000080032

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
4009-4026S				





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SECRETARY OF STATE

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# COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 Ref. # W09000040265

SUBJECT:	MJM Family, Inc.		
-	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles 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:	Nam	vin Mickow e (Printed or typed)	
·	915 Middle River Dr., Ste. 313 Address		
	Fort Lauderdale, FL 33304 City, State & Zip		
	954-643-2808  Daytime Telephone number		
	mmickow@cedsrx.com		
	E-mail address: (to be used for future annual report notification)		

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



September 8, 2009

MARVIN MICKOW 915 MIDDLE RIVER DR., STE. 313 FORT LAUDERDALE, FL 33304

SUBJECT: MM MANAGEMENT, INC.

Ref. Number: W09000040265

We have received your document for MM MANAGEMENT, INC. and your check(s) totaling \$70.00. 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 existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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

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) 245-6962.

Letter Number: 309A00029775

Valerie Herring Regulatory Specialist II New Filing Section

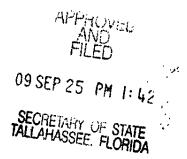
# ARTICLES OF INCORPORATION

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

#### ARTICLE I NAME

The name of the corporation shall be:

MJM Family, Inc.



#### ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 915 Middle River Dr., Ste. 313, Fort Lauderdale, FL 33304

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

# Any and all lawful business

#### ARTICLE IV SHARES

The number of shares of stock is:

10,000,000

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Marvin J. Mickow, Jr., President

915 Middle River Dr., Ste. 313

Fort Lauderdale, FL 33304

## ARTICLE VI REGISTERED AGENT

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

Marvin J. Mickow, Jr.

915 Middle River Dr., Ste. 313

Fort Lauderdale, FL 33304

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Marvin J. Mickow, Jr.

915 Middle River Dr., Ste. 313

Fort Lauderdale, FL 33304

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

MA	09/22/09	
Signature/Registered Agent	Date	
Ulful	09/22/09	
Signature/Incorporator	Date	