

PI1000017192

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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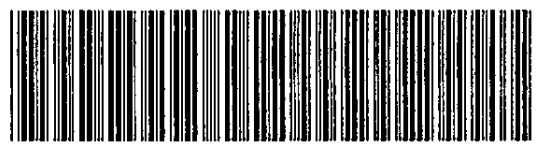
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/04/11--01013--029 **87.50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 FEB 16 PM 3:04

APPROVED
AND
FILED

VH

COVER LETTER

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

SUBJECT: M & M Transportation Svs. 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 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: Malcolm E. Mckenzie

Name (Printed or typed)

Po Box 493246

Address

Leesburg, Fl. 34749

City, State & Zip

352-255-3760

Daytime Telephone number

mmtransportsvs@aol.com

E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 7, 2011

MALCOM E. MCKENZIE
PO BOX 493246
LEESBURG, FL 34749

SUBJECT: M & M TRANSPORTATION SVS. INC
Ref. Number: W11000007411

We have received your document for M & M TRANSPORTATION SVS. INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the corporation name in Article I.

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.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 511A00003216

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

APPROVED
AND
FILED

ARTICLE I NAME M & M Transportation Svs. Inc.
The name of the corporation shall be:

11 FEB 16 PM 3:04

ARTICLE II PRINCIPAL OFFICE

Principal street address
1312 N. 14th St.
Leesburg, Fl. 34748

Mailing address SECRETARY OF STATE
Po Box 493246 TALLAHASSEE, FLORIDA
Leesburg, Fl. 34749

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: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Malcolm E. McKenzie (President)
Address: 2000 Park Circle #79
Leesburg, Fl. 34748

Name and Title: _____
Address: _____

Name and Title: John W. McKenzie (Vice President)
Address: 2007 Staples Ave
Key West, Fl. 33040

Name and Title: _____
Address: _____

Name and Title: Lashea S. Salters (Treasury)
Address: 2710 Gregory Rd
Leesburg, Fl. 34748

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Malcolm E. McKenzie
Address: 2000 Park Circle #79
Leesburg, Fl. 34748

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Malcolm E. McKenzie
Address: Po Box 493246
Leesburg, Fl. 34749

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

Malcolm E. McKenzie

Required Signature/Registered Agent

2/11/11

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Malcolm E. McKenzie

Required Signature/Incorporator

2/11/11

Date