

P110000067728

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business' Entity Name)

(Document Number)

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2011 JUL 22 PM 4:16

W11000030994

7/27/11



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

11 JUL 22 AM 11:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

July 13, 2011

MICHAEL PORTER  
2050 TIGERTAIL BLVD.  
BAY F  
DANIA, FL 33004

SUBJECT: MP PRINTS, INC  
Ref: Number: W11000036994

We have received your document for MP PRINTS, INC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$35.00.

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) 245-6973.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 711A00016693

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLE I NAME** MP PRINTS, INC

The name of the corporation shall be:

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**ARTICLE II PRINCIPAL OFFICE**

Principal street address

2050 Tigertail Blvd, Bay F  
Dania, FL 33004

Mailing address, if different is:

N/A

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and all Lawfull business

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000,000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Michael Porter / President Name and Title:

Address: 2050 Tigertail Blvd, Bay F Address:

Dania, FL 33004

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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: Michael Porter

Address: 20315 N.E 10th Ct

Miami, FL 33179

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Michael Porter

Address: 20315 N.E 10th Ct

Miami, FL 33179

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

*Michael Porter*

Required Signature/Registered Agent

7.7.11

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.

*Michael Porter*

Required Signature/Incorporator

7.7.11

Date