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	(Requestor's Name	e)
	(Address)	·
	(Address)	
	(City/State/Zip/Pho	ne #)
	K-UP 🔲 WAIT	MAIL
	(Business Entity N	
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Certified Copies	Certificat	es of Status
Special instruct	tions to Filing Officer:	
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COVER LETTER

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

SUBJECT: MLD TRACKING SY	STEMS INC
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy Certificate of Status ADDITIONAL COPY REQUIRED
FROM: Mervyn Dornford Name	(Printed or typed)
282 NW 104 Ave	Address
Coral Springs, FL330	71 State & Zip
954 720 7989 Daytime To	elephone number

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

mervyn01@bellsouth.net E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION

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

	DIVISION OF CORPURATIONS
ARTICLE I NAME MLD TRACKING S The name of the corporation shall be:	YSTEMS INC
	12 JAN 17 AM II: 33
ARTICLE II PRINCIPAL OFFICE Principal street address	Mailing address, if different is:
282 NW 104 Ave	waning address, it different is.
Coral Springs,	
Florida 33071	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
Any and all business.	
ARTICLE IV SHARES	
The number of shares of stock is: 1000	
ARTICLE V INITIAL OFFICERS AND/OR DIREC	
Name and Title: Mervyn Dornford, Presiden	Mame and Title:
Address: 282 NW 104 Ave	Address:
Coral Springs, Florida 33071	
3.03 3.44	
Name and Title: Fay Dornford Secretary	Name and Title:
Address: 282 NW 104 Ave Coral Springs	
Florida 33071	
	N. LTM.
Name and Title: Address:	Name and Title: Address:
Addiess,	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT accepta	able) of the registered agent is:
Name: Mervyn Dornford.	
Address: 282 NW 104 Ave	
Coral Springs, FL33071	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Name: Mervyn Dornford Address: 282 NW 104 Ave	
Address: 282 NW 104 Ave Coral Springs, FL33071	
Having been named as registered agent to accept service of particles of this certificate, I am familiar with and accept the appointment	process for the above stated corporation at the place designated in
inis(ceruficate, i am jamutar with ana accept the appointment	as registered agent and agree to act in this capacity
Meuse L Damind	01/05/2012
Meugh L Homford Required Signature/Registered Agen	nt Date

Usubmit 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.

01/05/2012.