

P12000069215

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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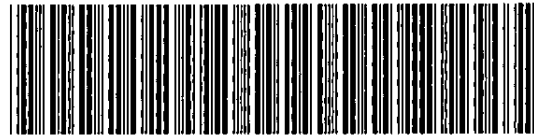
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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08/10/12--01017--009 **87.50

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRB
8/13/12

COVER LETTER

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

SUBJECT: MEHLER GROUP 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: Robert Mehler

Name (Printed or typed)

875 NE 205 Terrace

Address

Miami, FL 33179

City, State & Zip

305 586 7036

Daytime Telephone number

bobbymehler@gmail.com

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

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

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: MEHLER GROUP INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
875 NE 205 Terrace
Miami, FL 33179

Mailing address, if different is:
C/O FREEDMAN & CO (CPA)
17140 Royal Palm Ave
Weston, FL 33326

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Importation, distribution, and wholesaling wine

ARTICLE IV SHARES 1000

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Robert Mehler (President)
Address: 875 NE 205 Terrace
Miami, FL 33179

Name and Title: _____
Address: _____

Name and Title: Sandra Henao Cano (Vice President)
Address: 875 NE 205 Terrace
Miami, FL 33179

Name and Title: _____
Address: _____

Name and Title: Robert Mehler (Sec - Treasurer)
Address: 875 NE 205 Terrace
Miami, FL 33179

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

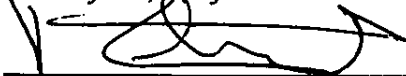
Name: Robert Mehler
Address: 875 NE 205 Terrace
Miami, FL 33179

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Robert Mehler
Address: 875 NE 205 Terrace
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



Required Signature/Registered Agent

8-8-12

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.



Required Signature/Incorporator

8-8-12

Date

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TALLAHASSEE, FLORIDA