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(Re	equestor's Name)	
٠	dress)	
	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	.WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	· · · · · · ·
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	-	

Office Use Only



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SECRETARY OF STATE

or 2/11/13

COVER LETTER

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

SUBJECT: N2	2007E, INC				
	(PROPOSED CORPORA	TE NAME – MUST INCL	<u>UDE SUFFIX</u>)		
Enclosed are an o	riginal and one (1) copy of the arti	cles of incorporation and	d a check for:	1	
□ \$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED		
FROM:	Allan Hoffman	(Printed or typed)			
•	1610 Southern Blv	d.			,-m;
_	A	Address		ಷ	35. 35. 35. 36. 36. 36. 36. 36. 36. 36. 36. 36. 36
,	WEST PALM BEA	·)6	FEB	
_	City,	State & Zip	· · · · · ·	8-	SAN CAN
!	561-478-7066			25	300
_	Daytime T	elephone number		PK 12: 39	STAI
<u></u>	ALH1@JUNO.COI			ø	SKO.
	E-mail address: (to be used	a for future annual report	nourication)		-

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)

The name of the comor:	ME N2007E, INC.		I) SECRETAR OF OF	CORPORAT
ARTICLE II PRI	NCIPAL OFFICE Principal street address OEU ROAD	Mailing ac	·	 3 PM 12: 3
BOYNTON BY	EACH, FL 33437			
ARTICLE III PUR The purpose for which	PPOSE the corporation is organized is:	egal purpose po	ermitted b	y law.
ARTICLE V INT	ARES 500 PAR VALUE \$1.00 PER SHA stock is:			
	MICHAEL LEIGHTON			
Name and Title	MICHAEL LEIGHTON 10982 DENOEU RD	Name and Title:		
		Name and Title:		
Address	10982 DENOEU RD	_ Name and Title:		
Address	10982 DENOEU RD BOYNTON BEACH, FL 33437	Name and Title: Address: Name and Title:		
Address Name and Title	10982 DENOEU RD BOYNTON BEACH, FL 33437	Name and Title: Address: Name and Title:		
Address Name and Title Address	10982 DENOEU RD BOYNTON BEACH, FL 33437	Name and Title: Address: Name and Title: Address:		
Address Name and Title Address	10982 DENOEU RD BOYNTON BEACH, FL 33437	Name and Title:		

Name an	d Title:	Name and Title:	
Address		Address:	
ARTICLE VI The name and FI	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) o	the registered agent is:	
Name:	MICHAEL LEIGHTON		
Address:	10982 DENOEU RD		3
11001030	BOYNTON BEACH, FL 33437		Story C
ARTICLE VII	INCORPORATOR		FILED FRY OF ST OF COMPARY -8 PM Z:
The name and ad	Idress of the Incorporator is:		⊼ ®RSI
Name:	MICHAEL LEIGHTON		39
Address:	10982 DENOEU RD		SS
	BOYNTON BEACH, FL 33437	•	
	ned as registered agent to accept service of process am familiar with and accept the appointment as reg		
	N		02/ 06 /2013
	Required Signature/Registered Agent		Date `
I submit this doc	ument and affirm that the facts stated herein are Department of State constitutes a third degree felon	true. I am aware that the y as provided for in s.817.	false information submitted in a 155, F.S.
	$\mathcal{X}\setminus\mathcal{Y}$		02/06/2013
	Required Signature/Incorporator		Date
\bigvee			