

P13000014761

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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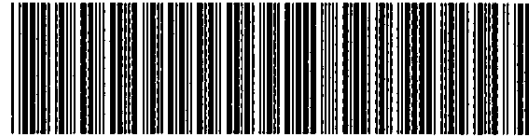
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/25/13--01032--008 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 FEB 12 PM 1:29

P-113113-02+3-5366

COVER LETTER

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

SUBJECT: **AMM, 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: **AnneMarie Martin**

Name (Printed or typed)

2762 Englewood Dr

Address

Melbourne, FL 32940

City, State & Zip

321-693-6724

Daytime Telephone number

AnneMarie.Martin612@yahoo.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

January 28, 2013

ANNEMARIE MARTIN
2762 ENGLEWOOD DR
MELBOURNE, FL 32940

SUBJECT: AMM, INC
Ref. Number: W13000005366

** AMM Quality Services, Inc
See correction
Attached*

We have received your document for AMM, INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The person designated as incorporator in the document and the person signing as incorporator must be the same.

Please return 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) 245-6052.

Pamela Smith
Regulatory Specialist II

Letter Number: 113A00002045

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

The name of the corporation shall be: **AMM QUALITY SERVICES, INC**

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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2762 ENGLEWOOD DRIVE

MELBOURNE, FL 32940

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **Sales and Marketing**

ARTICLE IV SHARES 100

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **AnneMarie Martin, President**

Name and Title: **Michael Martin, Vice President**

Address **2762 Englewood Dr**
Melbourne, FL 32940

Address: **2762 Englewood Dr**
Melbourne, FL 32940

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

13 FEB 12 PM 1:29

Address:

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

AnneMarie Martin

2762 Englewood Dr.

Melbourne, FL 32940

The name and address of the Incorporator is:

AnneMarie Martin

2762 Englewood Dr.

Melbourne, FL 32940

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 */Incorporate*

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

Date _____