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FLORIDA PROFIT/NON PROFIT CORPORATION MMG CONSULTANTS INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

AFFIDAVIT

BEFORE ME, the undersigned authority, on this day personally appeared, JEFFREY GRUENINGER who after being first duly sworn, under oath, deposes and says:

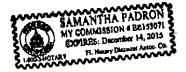
- He undersigned is the sole DIRECTOR of MMG CONSULTANTS INC. a Florida corporation, filed with the Florida Department of State on February 27, 2009.
- 2. The undersigned hereby consents to and authorizes the use of the name MMG CONSULTANTS INC.
- 3. The undersigned has personal knowledge of the facts and matters set forth herein and therefore has no intentions of reinstating the Dissolved entity.

FURTHER AFFIANT SAYETH NAUGHT.

		Seffrey Gruoninger	
		JEFFREY GRUENINGER	
STATE OF FLORIDA)		
COUNTY OF MIAMI-DADE) SS:)		

PERSONALLY appeared before me, JEFFREY GRUENINGER who is personally known to me, who being by me first duly sworn, acknowledges that he signed the foregoing for the purposes therein expressed.

WITNESS my hand and seal this 15 day of APRIL, 2014.



Notary Public

TALLAHASSEE FLORIDA

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

ARTICLE I NAM The name of the corporat	E MMG Consultants	inc.		_
ARTICLE II PRI	NCIPAL OFFICE Principal street address EVENUE Suite 100		Mailing address, if different is:	
Coral Gables,	Florida 33134			
ARTICLE III PUR The purpose for which the	POSE he corporation is organized is:			
Transacting, po	urchasing and selling of go	ods and an	ıy and all lawful bus	iness.
	VAL OFFICERS AND/OR DIRECTOR		WILANASSES.	14 APR 15
Name and Title Address	Jeffrey Grueninger, Director 267 Minorca Avenue	Name and Title Address:	#3 → 1 #3 → 1 #3 → 1	
	Suite 100 Coral Gables, Florida 33134	- -	> 10	<u>+</u>
Name and Title:			:	
Address		_ Address:		
		-		*****
Name and Title:		_ Name and Title _ Address:	<u> </u>	
		<u>.</u>		

		•	(conti.)
Name and	f Title:	Name and Title:Address:	· · · · · · · · · · · · · · · · · · ·
r			
	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of Jeffrey Grueninger	the registered agent is:	14
Name:	267 Minorca Avenue Suite 100	•	APR T
Address:	Coral Gables, Florida 33134	•	15 - 15 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
ARTICLE VII	INCORPORATOR dress of the Incorporator is:		PH T: 14
Name; "	Jeffrey Grueninger		
Aðdress:	267 Minorca Avenue Suite 100		
Having been nam this certificate, I d	Coral Gables, Florida 33134 ned as registered agent to accept service of process on familiar with and accept the appointment as reg	for the above stated corpo istered agent and agree to d	ration at the place designated in act in this capacity 4/10/14
I submit this docs document to the I	Required Signature/Begistered Agent ument and affirm that the facts stated herein are Department of State constitutes athird degree felon Required Signature functions	icue. I am aware that the j y as provided for in s.817.1	Date false information submitted in a 55, F.S. 24/10/11/