

PA000043964

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

April 28, 2014

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

Re: P11000062390 2M INDUSTRIES CORPORATION

To whom it may concern:

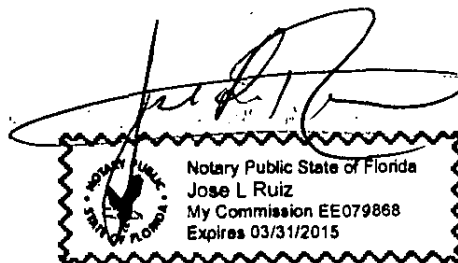
By means of this letter I am advising that I have no intentions of re-instating the above mentioned dissolved corporation.

Should you have any questions or concerns please do not hesitate to contact me.

Sincerely,

  
Manuela C. Dominguez

**Maria Ruiz**  
**L&M Accounting Serv.**  
7750 SW 117 Ave Suite 201F  
Miami, FL 33183



## COVER LETTER

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

SUBJECT: **2M INDUSTRIES CORPORATION**

(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: **MARIA E RUIZ**

Name (Printed or typed)

**7750 SW 117TH AVE SUITE 201D**

Address

**MIAMI FLORIDA 33183**

City, State & Zip

**305 595 -2407**

Daytime Telephone number

**MARIAQUIROS9@HOTMAIL.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: 2M INDUSTRIES CORPORATION

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

18940 NW 86 AVE #3605

HIALEAH FLORIDA 33015

Mailing address, if different is:

7750 SW 117TH AVE SUITE 301D

MIAMI FLORIDA 33183

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY AND ALL LEGAL PURPOSES

EIN #45-2714090

**ARTICLE IV SHARES**

The number of shares of stock is: 100 @ \$1.00 EA

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: MANUELA DOMINGUEZ, PRESIDENT

Address: 18940 NW 86 AVE #3605

HIALEAH FLORIDA 33015

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

14 MAY 12 AM 10:08  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

(conti.)

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: MANUELA DOMINGUEZ

Address: 18940 NW 86 AVE #3605

HIALEAH FLORIDA 33015

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: MANUELA C DOMINGUEZ

Address: 18940 NW 86 AVE #3605

HIALEAH FLORIDA 33015

*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*

*Manuela Dominguez*  
Required Signature/Registered Agent

04/28/2014

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.*

*Manuela Dominguez*  
Required Signature/Incorporator

04/28/2014

Date

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA