

P14000098546

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

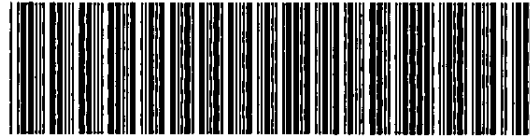
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000265527290

12/08/14--01028--007 **78.75

14 DEC -8 AM 8:34
RECEIVED
FEB 14 2015

COVER LETTER

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

SUBJECT: **CM INDUSTRIES, 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: **Alan J. Paoli, Esquire**
Name (Printed or typed)

1720 Harrison Street, Suite 6CW
Address

Hollywood, FL 33020
City, State & Zip

954-925-9828
Daytime Telephone number

alan@paolilawfl.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: CM INDUSTRIES, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

7801 N FEDERAL HIGHWAY, STE 19-104

BOCA RATON, FL 33487

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business purpose.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Clifford Muney, President

Name and Title: _____

Address 7801 N. Federal Highway, Ste 19-104

Address: _____

Boca Raton, FL 33487

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

14 DEC -8 AM 8:34

(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: Alan J. Paoli, Esquire

Address: 1720 Harrison Street, Suite 6CW

Hollywood, FL 33020

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Clifford Muney

Address: 7801 N. Federal Highway, Ste 19-104

Boca Raton, FL 33487

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

12/5/2014
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.

Clifford Muney
Required Signature/Incorporator

12/5/2014
Date

14 DEC -8 AM 8:34
TAMPA, FL 33602-1000