

P 16 00004 01 60

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

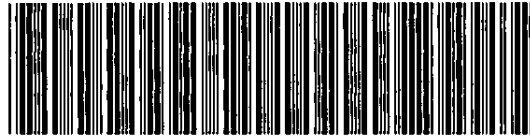
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03/10/16--01019--002 **78.75

FILED
16 MAY -6 PM 4:28
RECEIVED
FBI/DOJ
FEDERAL BUREAU OF INVESTIGATION

5/10/14

COVER LETTER

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

SUBJECT: _____

H & M Contractors, 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: _____

H & M Contractors, Inc.

Name (Printed or typed)

2318 Winding Cove

Address

Oviedo, FL 32765

City, State & Zip

(407) 666-4352

Daytime Telephone number

Office @ SAG-Group.net

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

16 MAY - 6 PM 4:28

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

FILED

16 MAY -6 PM 4: 28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

March 17, 2016

H & M CONTRACTORS INC.
2318 WINDING COVE
OVIEDO, FL 32765

SUBJECT: H & M CONTRACTORS, INC.
Ref. Number: W16000020169

We have received your document for H & M CONTRACTORS, 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.

Please return the corrected original and one copy of 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.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 816A00005558

RECEIVED
16 MAY -6 AM 11: 25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

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

FILED

ARTICLE I NAME

The name of the corporation shall be: M & H Contractors, Inc.

16 MAY -6 PM 4: 2

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2318 Winding Cove

Oviedo, FL 32765

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any legal business purpose.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Matthew Morganti / Vice President

Name and Title: Heather Hammen / President

Address

616 PONY CT
WINTER SPRINGS, FL 32708

Address:

2318 Winding Cove
Oviedo FL 32765

Name and Title: Dylan Hammen / Secretary

Name and Title:

Address

6235 Chickasaw Trl.
Orlando, FL 32765

Address:

Name and Title:

Name and Title:

Address

Address:

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: Jesse Hammen
Address: 2318 Winding Cove
Oviedo, FL 32765

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16 MAY -6 PM 4:28
NOTICE OF FILING
ALL AGENTS MUST
FILE HERE

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: ~~Heather Hammen~~ Matthew R Morgioni
Address: ~~2318 Winding Cove~~ 616 Pony Court
~~Oviedo FL 32765~~ Winter Springs, FL 32708

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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
2/7/2016
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
2/7/2016
Date