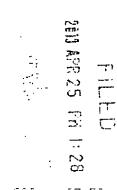
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COVER LETTER

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

M.F. **SUBJECT:** Enclosed are an original and one (1) copy of the articles of incorporation and a check for: **2** \$87.50 ☐ \$70.00 **□** \$78.75 **□** \$78.75 Filing Fee Filing Fee Filing Fee Filing Fee, & Certified Copy & Certificate of Status Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: KEN WEBSTEK

Name (Printed or typed)

6/49 5ASON TRA-1/

Address (UEDSTER Name (Printed or typed) 850 322-3/9 Z

Daytime Telephone number

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 corporat	tion shall be: MM 58	RVICES	of N.F. I	FOC	
ARTICLE II PRINC	Principal <u>street</u> address		Mailing address, if diffe	ment is:	
-7-11 1	. Copeland ST. & FL 32304				
ARTICLE III PURPO The purpose for which the	DSE he corporation is organized is:	NY AND	All LEGAL	l Busin	VESS
					- - -
	· .				-
ARTICLE IV SHARE The number of shares of	ES stock is:			APR 25	- - -
•	ME VIN FOR DESCENTED TO THE STATE OF THE STA	SEFFIK	tle:		
Name and Title:	ANTWAN FORD 3204 Olson R TALLALASSEE FL	Name and Tie Address:	11c: ME (REN 15 3204 Oli 1A-1/11-6ASSEE	SON Rd	- DIRECTOI of SAJES 2304
Name and Title:			tle:		
The number of shares of ARTICLE V INITIA RE, Name and Title Address Name and Title: Address	Stock is: /() O LOFFICERS AND/OR DIRECTORS ME VIN FOR DESON TALLALASSEE FC ANTWAN FORD TALLALASSEE FC	Name and Tie Address: 33359. Name and Tie Address: 33359 Name and Tie Name and Tie	11e: ME (REN 15 3204 Ols 1A-11A-6ASSEE	Ford Ford	- DIRECTOR

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: KEN CEKBSTER	··
Address: 6149 JASON TRAIL	
TALLAHASSEE FL 323	<u>1</u> 7
	22 31
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	R 25
Name: KEN WEBSTER	
Name: KEN WEBSTER Address: 6/49 JASON TRAI	7
TACLAGASSEE FL 3	<u></u> 2317 28
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: 4/25/	19
Effective date, if other than the date of filing: 4/23/ (If an effective date is listed, the date must be specific and con-	/ / OPTIONAL) not be more than five days prior or 90 days after the
filing.)	
Note: If the date inserted in this block does not meet the applicab	
the document's effective date on the Department of State's records	S.
Having been named as registered agent to accept service of proce	ess for the above stated corporation at the place designated in
this certificate, I am familiar with and accept the appointment as i	, ,
Required Signature/Registered Agent	4/25/19
Required Signature/Registered Agent	Date
I submit this document and affirm that the facts stated herein a	re true. I am aware that the false information submitted in a
document to the Department of State constitutes a third degree fel	ony as provided for in s.817.155, F.S.
Little Mobile	4/25/19
Required Signature/Incorporator	U Date