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To:

Division of Corporations

3052201440

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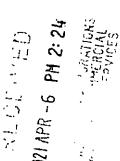
From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I200000000019 : (305)552-5973 Phone Fax Number : (305)675-5944

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Cand 1	Address:			
rmall.	Address:			



## FLORIDA PROFIT/NON PROFIT CORPORATION M& M PRODUCE SERVICE SERVICE CORP.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

## ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

M & M PRODUCE SERVICE CORP.	· 
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing addre	ss is:
7175 SW 8TH ST # 210	
MIAMI FL. 33144	· · · · · · · · · · · · · · · · · · ·
LE III SHARES: The number of shares of stock is:	100
ARTICLE IV INITIAL DIRECTORS AND/OR	OFFICERS:
MARIA E. RODRIGUEZ	>)
7175 SW 8TH; ST # 210	
MIAMI FL. 33144	57
	2
	1885
	(T)
	7 P. 15
ICLE V INITIAL REGISTERED AGENT AND S	TREET ADDRES
me and Florida street address (PO Box not acceptable) o	f the registered ager
MARIA E, RODRIGUEZ	
7175 SW 8TH ST # 210	
MIAMI FL. 33144	
ICLE VI INCORPORATOR: The name and addre	ss of the Incorporate
	ss of the Incorporate

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

Registered Agent

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.

Incorporator

Liate

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