9/21/22, 2:50 PM

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From:

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Account Number : 120150000109 : (561)544-8862

Fax Number : (954)697-0130

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Email Address: sales@eloenterprises.us

FLORIDA PROFIT/NON PROFIT CORPORATION M & P EXPORTS GROUP, INC

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Corporate Filing Menu

Help

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

<u>ICLE II PRI</u>	<u>NCIPAL OFFICE</u>			
	Principal street address	Mailing address, if different is:		, if different is:
0 FAIRWAY DR				
ERFIELD BEACH, FL	33441		 	
TICLE III PUI	<u>POSE</u>			
purpose for whic	th the corporation is organized is: Anv and	iii iawiui ousiness.	·	 -
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TICLE IV SHA				
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Name and	Title:	Name and Title:	
Address		Address:	
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		•	
	EGISTERED AGENT rida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	ELO ENTERPRISES, INC.		
Address:	4700 NW Boca Raton Blvd #202	· .	
	Boca Raton, FL 33431		
ARTICLE VII I	NCORPORATOR		
The name and add	dress of the Incorporator is:		·
Name:	MICHELLE LOPES LIMA	· · · · · · · · · · · · · · · · · · ·	
Address:	14951 Royal Oaks Ln - Apt 809		25
	North Miami, FL 33181		
ARTICLE VIII E	EFFECTIVE DATE:		~ ~
Effective date, if o	ther than the date of filing:	(OPTIONAL)	
(If an effective da filing.)	te is listed, the date must be specific and can	not be more than five days prior (or 90 days after the
- -			. ∾
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certificate, I am fan	d as registered agent to accept service of process niliar with and accept the appointment as registe	red agent and agree to act in this car	he place designated in this pacity
	Hiplomical	<u>. </u>	09/21/2022
	Required Signature/Registered Agent	<u> </u>	Date
I submit this document to the Do	ment and affirm that the facts stated herein are epartment of State constitutes a third degree fe	re true. I am aware that the false in lony as provided for in s.817.155, F	formation submitted in a .S.
Mic	heliz Cima (Sep 21, 2022 15:46 ADT)	·	09/21/2022
Required Signature	Ancorporator	Date	