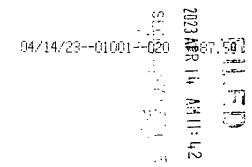
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COVER LETTER

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

SUBJECT: <u>M&</u>	M Companies Corp (PROPOSED CORPORA	ATF, NAME – <u>MÜST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	ticles of incorporation and	I 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 CO	PY REQUIRED
FROM:	Timothy P. Atkinson Nam PO Box 1110	e (Printed or typed)	
	<u> </u>	Address	
_	Tallahassee, F1, 32302	. State & Zip	
	(850) 521-0700 Daytime	Telephone number	
	annie@phoenixglobalinternatio E-mail address: (to be use	onal.co d for future annual report i	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 normal of the correspondent	n shalf be: M&M Companies Corp		
ARTICLE II PRINCII			
	rincipal street address		Mailing address, if different is:
4581 Weston Rd. #148			
Weston, FL 33331			
<u>ARTICLE III _ PURPOS</u>			
			10
			(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
	ock is: <u>100</u> OFFICERS AND/OR DIRECTORS		MIII: 42
Name and Title: <u>⊆</u>	Christopher Murphy, President, Secretary	Name and Title	<u>.</u>
Address _	4851 Weston Rd. #148	Address:	<u>,</u>
_	Weston, FL 33331		
_			
Name and Title:_		Name and Title	»
Address		Address:	
-			
Name and Title:_		Name and Title	<u>. </u>
Address		Address:	
-			
_			

Name an	nd Title:	Name and Title:	
Address	s Address:		
ADTICUE LA	DPZICTPDFB 4Z PNT		
	REGISTERED AGENT lorida street address (P.O. Box NOT acc	eptable) of the registered agent is:	
Name:	Christopher Murphy		~ .
Address:	4581 Weston Rd., #148		2023 Al
	Weston, F1, 33331		N 18
ARTICLE VII	<u>INCORPORATOR</u>	が入った。 無が、B	
The <u>name and a</u>	ddress of the Incorporator is:		
Name:	Christopher Murphy		>
Address:	4581 Weston Rd. #148		
	Weston, FL 33331		
Effective date, if	EFFECTIVE DATE: other than the date of filing: fate is listed, the date must be specific a	. (OPTIONAL) and cannot be more than five days prior or 90 days after	· the
	r inserted in this block does not meet the effective date on the Department of State	applicable statutory filing requirements, this date will not be s records.	: listed as
certificate, I am j		f process for the above stated corporation at the place design as registered agent and agree to act in this capacity	ated in this
	YW	4/13/2023	
	Required Signature/Registered /	Agent Date	
I submit this document to the	cument and affirm that the facts stated l Department of State constitutes a third de	nerein are true. I am aware that the false information sub- gree felony as provided for in s.817.155, F.S.	mitted in a
	OW/	4/13/2023	
Required Signatu	.re/Incorporator	Date	