

P24000050314

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

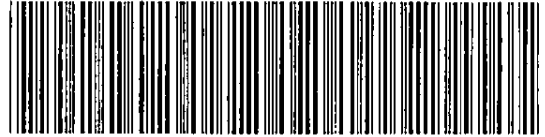
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

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08/07/24--01005--010 **70.00

RECEIVED

2024 AUG -6 PM 4:00

CALLAHANSEE, FLORIDA

MS

COVER LETTER

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

SUBJECT: M & J PROFESSIONALS, INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

<input type="checkbox"/> \$70.00	<input type="checkbox"/> \$78.75
Filing Fee	Filing Fee & Certificate of Status

<input type="checkbox"/> \$78.75	<input type="checkbox"/> \$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
ADDITIONAL COPY REQUIRED	

FROM: WALTER J MCELHANEY, JR
Name (Printed or typed)

1531 SW 63RD TERRACE
Address

NORTH LAUDERDALE, FL 33068
City, State & Zip

954-638-1930
Daytime Telephone number

waltermcelhaney7@gmail.com
E-mail address: (to be used for future annual report 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 name of the corporation shall be: M & J PROFESSIONALS, INC

ARTICLE II PRINCIPAL OFFICE

Principal <u>street</u> address <u>1531 SW 63RD TERRACE</u> <u>NORTH LAUDERDALE, FL 33068</u> _____ _____	Mailing address, if different is: _____ _____ _____
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ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>W J MCELHANEY JR, PRESIDENT</u>	Name and Title: _____
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Address <u>1531 SW 63RD TERRACE</u>	Address: _____
<u>NORTH LAUDERDALE, FL 33068</u>	_____
_____	_____

Name and Title: <u>D L JOHNSON, V PRESIDENT</u>	Name and Title: _____
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Address <u>3907 N FEDERAL HWY</u>	Address: _____
<u>POMPANO BCH, FL 33064</u>	_____
_____	_____

Name and Title: _____	Name and Title: _____
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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: WALTER J MCELHANEY JR

Address: 1531 SW 63RD TERRACE

NORTH LAUDERDALE, FL 33068

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: WALTER J MCELHANEY JR

Address: 1531 SW 63RD TERRACE

NORTH LAUDERDALE, FL 33068

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 days prior or 90 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

8/6/2024

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

8/6/2024

Date

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