

P95.0000 44673

6-6-95

Broward

Requester's Name

Address

City

State

ZIP

Phone

VALIDATION ONLY

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+05 07/95+0000+0000
++++12.90 +++++12.90

CORPORATION(S) NAME

M. J. K. INC.

FILED
1995 JUN -9 PM 1:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EMPIRE Toll Free: 1-800-432-3028

☒ Profit
☐ NonProfit

☐ Amendment

☐ Merger

☐ Foreign

☐ Dissolution

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Other

☐ Reinstatement

☐ Reservation

☐ Change of Registered Agent

☒ Certified Copy

☐ Photo Copies

☐ Certificate Under Seal

☐ Call When Ready

☐ Call If Problem

☐ After 4:30

☒ Walk In

☐ Will Wait

☒ Pick Up

☐ Mail Out

Name
Availability
Document
Examiner
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Verifier
Acknowledgment
W.P. Verifier

CERTIFIED COPY

W-11606



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

RECEIVED
95 JUN -9 AM 11:14
DIVISION OF CORPORATIONS

June 7, 1995

EMPIRE

TALLAHASSEE, FL

SUBJECT: M.J.K. INC.
Ref. Number: W95000011606

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for M.J.K. INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6904.

Freida Chesser
Corporate Specialist

Letter Number: 695A00028110

**ARTICLES OF INCORPORATION
OF
M. J. K. Z. INC.**

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

M. J. K. Z. INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of corporation shall be:

**2108 NW 2ND AVE
FT LAUDERDALE, FL 33311**

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

500 SHARES @ \$1.00 PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the registered agent is:


**JOY PENN
2108 NW 2ND AVE
FT LAUDERDALE, FL 33311**

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

**JOY PENN
2108 NW 2ND AVE
FT LAUDERDALE, FL 33311**

The undersigned has (have) executed these Articles of Incorporation this 5TH day JUNE, 1995.


Signature/Title

Incorporator

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TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is:

M. J. K. Z. INC.

2. The name and address of the registered agent and office is:

JOY PENN
2108 N W 2ND AVE
FT LAUDERDALE, FL 33311

SIGNATURE _____
(corporate officer)

TITLE Incorporator

DATE 6/5/95

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TALLAHASSEE, FLORIDA

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE NAMED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE _____

DATE 6/5/95

REGISTERED AGENT FILING FEE: \$35.00