

TRANSMITTAL LETTER

195000047970

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

400001503474  
-06/01/95--01066--016  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: M. C. N. Enterprises, Inc.  
(Proposed corporate name - must include suffix)  
MMS CONSULTING, INC

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

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

FROM: Said Ahmed Korany  
Name (printed or typed)

9873 Lawrence Rd. I. 209  
Address

Boynton Beach, FL. 33436  
City, State & Zip

407-967 3333  
Daytime Telephone number

W95-11722

6/13/95  
TA

cc628  
cc602  
cc671

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

June 8, 1995

SAID AHMED KORANY  
9873 LAWRENCE ROAD STE 1209  
BOYNTON BEACH, FL 33436

SUBJECT: M.C.N. ENTERPRISES, INC.  
Ref. Number: W95000011722

We have received your document for M.C.N. ENTERPRISES, INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(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) 487-6878.

Terri Buckley  
Corporate Specialist

Letter Number: 495A00028343

## ARTICLES OF INCORPORATION

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. C. N. Enterprises, Inc.~~  
HMS Consulting, Inc.

### ARTICLE II PRINCIPAL OFFICE

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

9873 Lawrence Rd. #1209  
Boynton Beach, FL 33436

### ARTICLE III SHARES

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

100 shares of \$20.00 each.

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Said Ahmed Korany.  
9873 Lawrence Rd. #1209  
Boynton Beach, FL - 33436

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Said Ahmed Korany  
9875 Lawrence Rd. # I-209  
Boynton Beach, FL 33436

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

25 day of May, 19 95.



president

Signature

Signature

Signature

**NOTE:** Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF  
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. C. N. Enterprises, Inc.~~  
M. H. S. Consulting, Inc.

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

Said Ahmed Korony  
(NAME)  
9873 Lawrence Rd. 1. 209  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)  
Boynton Beach. FL. 33436  
(CITY/STATE/ZIP)

*Having been named as registered agent and to accept service of process for the above stated 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)

5/25/95  
(DATE)