

P95000071016

TRANSMITTAL LETTER

FILED

95 SEP 12 PM 1:23

SEC. OF STATE
TALLAHASSEE, FLORIDA

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

000001583220
-09/13/95--01001--013
****131.25 ****131.25

SUBJECT: M International Corporation
(Proposed corporate name - must include suffix)

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

FROM: Robert Monte
Name (printed or typed)

401 So. Lincoln Ave., "B"
Address

Clearwater, Florida 34616
City, State & Zip

(813) 449-2243
Daytime Telephone number

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

2-14-95

Articles of Incorporation of M International Corporation

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TALLAHASSEE, FLORIDA

The undersigned subscriber to these Articles of Incorporation, natural person competent to contract, hereby form a corporation under the laws of the State of Florida.

Article I - Corporate Name

The name of corporation: M International Corporation

Article II - Duration

This corporation shall exist perpetually unless dissolved according to Florida Law.

Article III - Purpose

This corporation is organized for the purpose of managing in any activities or business permitted under the laws of the United States and the State of Florida.

Article IV - Capital Stock

The corporation is authorized to issue two million shares of \$.001 par value Common Stock, which shall be designated Common Shares.

Article V - Initial Registered Office and Agent

The name and address of the Initial Registered Agent of this Corporation is:

Mr. Robert Monte
L & M Group, LC
401 S. Lincoln Ave., Suite B
Clearwater, Florida 34616
(813) 449-2243

The principal place of business is the same as the registered office.

Article VI - Initial Board of Directors

This corporation shall have one two (2) directors initially. The number of directors may either be increased or decreased from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial directors of the corporation are as follows:

Owen Laughlin
401 So. Lincoln Ave. "B"
Clearwater, FL 34616

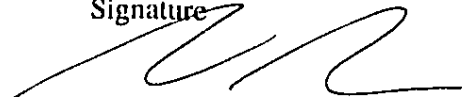
Robert Monte
401 So. Lincoln Ave. "B"
Clearwater, FL 34616

Article VII - Incorporator

The name and address of the person signing these articles of incorporation:

Mr. Robert Monte
L & M Group, LC
401 So. Lincoln Ave.
Clearwater, FL 34616

Signature

A handwritten signature in black ink, appearing to be 'RM', written over a horizontal line.

Robert Monte

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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 International Corporation

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

Robert Monte

(Name)

401 So. Lincoln Ave., "B"

(P.O. Box not acceptable)

Clearwater, Florida 34616

(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)

9/11/95
(Date)

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 OCT 31 AM 11:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P95000071016**

1 Corporation Name

M INTERNATIONAL CORPORATION

Principal Place of Business

Mailing Address

401 S. LINCOLN AVENUE, SUITE B
CLEARWATER FL 34616

401 S. LINCOLN AVENUE, SUITE B
CLEARWATER FL 34616

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2 New Principal Office Address, if Applicable

3 New Mailing Office Address, if Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

09/12/1995

5. FEI Number

59-3348598

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	MONTE, ROBERT	401 S. LINCOLN AVENUE, SUITE B	CLEARWATER FL 34616
D	LAUGHLIN, OWEN	401 S. LINCOLN AVENUE, SUITE B	CLEARWATER FL 34616
			400001996394--7 -11/05/96--01127--011 *****61.25 *****61.25
			400001996394--7 -11/05/96--01127--012 *****322.50 *****322.50
			JB11-4-96

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MONTE, ROBERT
401 S. LINCOLN AVENUE, SUITE B
L & M GROUP, LC
CLEARWATER FL 34616

Name

same

Street Address (P.O. Box Number is Not Acceptable)

same

Suite, Apt. #, Etc.

same

City

same

State Zip Code

FL

same

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

10/30/96

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/30/96 (813) 449-2243
Date Daytime Phone #

CR2E04C (7/96)