# 7000021693

#### TRANSMITTAL LETTER

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

SUBJECT:

M.G.M. Insurance Inc.

(Proposed corporate name - must include suffix)

for: \$70.00 Filing Fee	\$78.75 Filing foo & Cortificate	V\$122.50 \$131.25  Filing fee Filing fee  % Certified Copy Certified Copy  & Certificate  Additional Copy Required	
FROM:	M.G.M. Insurar NAME(printe		
	6301 N.W. 7th Address	Avenue, Ste E	
	Miami, FL 3315 City, State &	ephone number Parothy M. Land Market 1.	<u>_</u>
	(305) 751-700 Daytime Tel	ephone number Deric hay have hoped hoped	
NOTE: Ple	ase provide the o	Avenue, Ste E  So Called 3-10-97  B  So The phone number of the articles. N. Instead one copy of the articles.	

February 26, 1997

Sunshine Accounting & Tax Service P O Box 4001 Hollywood, FL 33083

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

RE: M.G.M. Insurance II
Articles of Incorporation

Dear Garrett Blanton:

We are the Accountants for the above captioned taxpayer who have referred your correspondence dated June 26, 1996 to our attention. We have attached the required document to complete the process of M.G.M. Insurance Articles of Incorporation. If it is not too late to have this order processed, as the filing fee has been paid in the amount of \$122.50, please have the attached processed.

If additional information is needed, please contact Mrs. Dorothy Mitchell @ (305) 751-7001 or send any correspondence(s) to 6301 N.W. 7th Avenue, Ste E, Miami, Florida 33150.

Sincerely, Sunshine Accounting & Tax Service

Antoinette Patterson,

President



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 25, 1996

DOROTHY RICHARDS 6301 NW 7TH AVE SUITE E MIAMI, FL 33150

SUBJECT: M.G.M. INSURANCE II INC.

Ref. Number: W96000013421

We have received your document for M.G.M. INSURANCE II 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):

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation"); and the registered agent's signature.

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) 487-6931.

Garrett Blanton Document Specialist

Letter Number: 696A00031377

#### 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. G. M. Insurance Agency II, Inc.

#### ARTICLE II PRINCIPAL OFFICE

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

6301 N.W. 7th Avenue, Ste E Miami, Florida 33150 (Place of business & Mailing address)

#### ARTICLE III SHARES

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

100 shares of Common Stock @ \$1.00 a share.

#### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of this initial registered agent is:

Dorothy Mitchell 6301 N.W. 7th Avenue, Ste E Miami, FL 33150

### 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):

Dorothy Mitchell - President 271 N.W. 151st Avenue Pembroke Pines, FL 33028 Mark Mitchell, V. Presdient 271 N.W. 151st Avenue Pembroke Pines, FL 33028

#### <u>Purpose</u>

To provide services to the public in the form of accounting and taxes for individuals, partnerships and corporations.

The forgoing purpose and activities will be interpreted as examples only and not as limitations, and nothing therein shall be deemed as prohibiting the corporation from engaging in any lawful act or activity for which a corporation may be organized under the general corporation law of Florida.

The undersigned incorporator (s) has (have) executed these Articles of Incorporation this 8th day of January 1996.

NOTE:

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

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

FILED

97 MAR 10 PM 3: 03

SEGR.
TALLAMASSEE. FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607-0501, FLORIDA STATUES, 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.

The name of the corporation is:	M.G.M. Insurance	Agency	II,	Inc.
The name and address of the registe	ered agent and office is:			
•	v			
Dorothy Mitchel	II			
	(Name)			
C204 N1 N4 74h	Avenue Ote F			
6301 M.VV. 7th /	Avenue, Ste E			
(P O Box or Mail D	rop Box NOT Acceptable)	_		
Miami, FL 3315	50			
	The name and address of the register  Dorothy Mitche  (National Control of the register)  (National Control of the register)  (National Control of the register)	The name and address of the registered agent and office is:  Dorothy Mitchell	The name and address of the registered agent and office is:  Dorothy Mitchell (Name)  6301 N.W. 7th Avenue, Ste E (P O Box or Mail Drop Box NOT Acceptable)	The name and address of the registered agent and office is:  Dorothy Mitchell (Name)  6301 N.W. 7th Avenue, Ste E (P O Box or Mail Drop Box NOT Acceptable)

Having been name 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 statues 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)