POZOZOSO//D

. 97 JUH-4 AMII:01

TALLAHASSEE, FLORIDA

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

Tallahassee, FL 32314		■ 10° 71		
SUBJECT:	n+m Car (Proposed of	bentry me porate name - must include	suffix)	-
		1	00002201 -06/04/97(****131.25	0515 01047007 ****131.25
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 CO	PY REQUIRED	
FROM: <u>GERAID</u> ; NE Me IN FOSH Name (Printed or typed)				
2560 E. HARley 5+				
INVERNESS F/ 34453 Cliv, State & Zip				
352-344-6493 Daytime Telephone number				

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

FILED

ARTICLES OF INCORPORATION

97 JUN -4 AM 11:01

TALLAHASSEE. FLORIDA The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I **NAME**

The name of the corporation shall be:

M + M CARPENTRY INC.

ARTICLE II PRINCIPAL OFFICE

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

2560 E. HARley St INVERNESS, FI 34453

ARTICLE III SHARES

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

<u>INITIAL REGISTERED AGENT AND STREET ADDRESS</u>

The name and Florida street address of the initial registered agent are:

GERAIDINE MEINTOSH

2560 E HARley St

INVERNESS F1 34453

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

GERAIDINE ME INFOSH

2560 E. Herley St 34453

6-2-1997 Date

(An additional article must be added if an effective date is requested.)

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/Registered Agent

Date