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OIVISION OF CORPORATIONS

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

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SUBJECT:	THE MEATMAN INC.		_
	(Proposed corporate name - must include suffix)		
Enclosed is an original	l and one(1) copy of the article	s of incorporation and a c	check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee	₩3122.50 Filing Fee	☐ \$131.25 Filing Fee,
	& Certificate	& Certified Copy	Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
FROM:	ANTHONY BROCCO		
	Name (Printed or typed)		
	2705 S.W. 14th COURT		
	Address		
	DEERFIELD BEACH FL 33442		
	City, State & Zip		
	954 570 5522		
	Daytime Telephone number		

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

# ARTICLES OF INCORPORATION

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:

THE MEATMAN INC.

### ARTICLE II PRINCIPAL OFFICE

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

PO.BOX 0635 POMOANO BCH. PL 33061

## ARTICLE III SHARES

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

500

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

ANTHONY BROCCO 2705 S.W. 14th COURT DEERFIELD BCH FL 33442

#### ARTICLE V INCORPORATOR

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

ANTHONY BROCCO 2705 S.W. 14 th COURT DEERFIELD BCH FL 33442

Signature/Incorporator

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 flating 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