P97000108111

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

800002381688--9 -12/24/37--01019--006 ******70.00 ******70.00

| SUBJECT: | TRIPLE M CONSULTING INC. | |
|-------------------------------|---|---|
| SUBJECT: | (proposed corporate name) | |
| | , | |
| Enclosed pleas above corporat | e find an original and one (1) copy of ion and check in the amount of \$ 35.0 AND ANOTHER \$35.00 FOR | the articles of incorporation for the 00 THE REGISTERED AGENT FEE |
| | | OTHE DATE |
| | | EFFECTIVE DATE |
| FROM: | MARK M. MURPHY | |
| | Name | |
| | 220 SUNRISE AVE. SUITE | <u>C</u> |
| | Address PALM BEACH, FL 33480 | |
| | City, State, & Zip | - |
| | (561)655-6688 | |
| | Telephoné Number | |

Note: Additional copy of articles is needed only when certified copy is requested.

ARTICLES OF INCORPORATION

<u>OF</u>

EFFECTIVE DATE

TRIPLE M CONSULTING INC.

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:

TRIPLE M CONSULTING INC.

ARTICLE II PRINCIPAL OFFICE

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

220 SUNRISE AVE. SUITE C PALM BEACH, FL 33480

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: $_{10,000}$

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

MARK M. MURPHY 220 SUNRISE AVE. SUITE C PALM BEACH, FL 33480



ARTICLE V INCORPORATOR(S)

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

MARK M. MURPHY

PRESIDENT / DIRECTOR

220 SUNRISE AVE. SUITE C PALM BEACH, FL 33480

ARTICLE VI PURPOSE AND EFFECTIVE DATE

Type of business: Real Estate Development and Consulting

The effective date shall be January 1, 1998

| The undersigned | has(have) exe | ecuted these Articles of Incorporation this |
|-----------------|---------------|---|
| 20ts | day of _ | December, 19 97. |
| | | Whit Mul Presiden |
| | | Signature/Title |
| | | Signature/Title |
| | | Signature/Title |

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the tate of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

| The name of the corporation is: | TRIPLE M CONSULTING | INC. |
|--|---|---|
| | | • |
| 2. The name and address of the registere | d agent and office is: | |
| MARK M. MURPHY | | <u>7</u> 5: 9 |
| (NAME) | | |
| 220 SUNRISE AVE. | SUITE C | 2 - |
| (P.O. BOX NOT AC | CEPTABLE) | |
| PALM BEACH, FL | 33480 | |
| (CITY/STAT | E/ZIP) | ADA 24 |
| | | ÷. |
| | SIGNATURE /// (corporate TITLE feeryen r DATE 12/20/47 | officer) |
| HAVING BEEN NAMED AS REGISTER PROCESS FOR THE ABOVE STATED CONTROL THIS CERTIFICATE, I HEREBY ACCEPT AND AGREE TO ACT IN THIS CAPACITY PROVISIONS OF ALL STATUTES RELATIONS OF MY DUTIES, AND I AND TIONS OF MY POSITION AS REGISTER | THE APPOINTMENT A Y. I FURTHER AGREE TING TO THE PROPER I FAMILIAR WITH AND | S REGISTERED AGENT TO COMPLY WITH THE AND COMPLETE PER- ACCEPT THE OBLIGA- |
| | DATE 12/2-/ | 47 |

REGISTERED AGENT FILING FEE: \$35.00