P99000049473

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

SUBJECT:	M & M -FINANCIAL SYSTEMS, In C. (Proposed corporate name - must include suffix)			
	(Proposed con	porate name – must include su	ffix)	
	•	•		
		30	000288842 05/27/990105	
•	•	,		3000 ***78.7!
Enclosed is an original a	nd one(1) copy of the artic	cles 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:	PHILIP E	MEHL SR. (Printed or typed)		,
	X 100.004	· ·		
,	959 CENTRI	AL PARKWAY		
		Address		
	•			
en-mac		L 34994		
	Cit	y, State & Zip		
	561220 Daytime	-3456 Telephone number	<u> </u>	

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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:
 M & M FINANCIAL SYSTEMS, FAC.

ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:
959 SE CENTRAL PARKWAY
STUART FL 34994-3904

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

Five Hundred (500) shares of common stock with a par value of One Dollar (\$1.00) per share.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent is:

PHILIP E MEHL 959 SE CENTRAL PARKWAY STUART FL 34994-3904

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

PHILIP E MEHL 959 SE CENTRAL PARKWAY STUART FL 24994-3904

hature/Incorporator

Date

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 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

5-25-99 Data

Date