# Part of State

Department of State	<b>;</b>		
Division of Corpora	tions	. •	•
P. O. Box 6327	<del>-</del>		00000233326701
Tallahassee, FL 32	314		-09/27/9901102014 *****78.75 *****78.75
SUBJECT:	A Jortinez and	/ Nende	Ison, INC.
	(Proposed corpo	orate name - must include su	ffix)
Enclosed is an origin	nal and one(1) copy of the articl	es of incorporation and	a check for:
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM	Ternando M	ADDITIONAL CO	
	Name (Pr 630 Orio)	inted or typed)  A VENUE	9 SEP 27 AM 10:
	305-59	1951 FL 3. Splic & Zip 12-4900	3/66 22
	Daytime Te	AUTHOR CORRECT JATE DOC. EX	T add Devado as R.A. 7-30-99
N	OTE: Please provide the original of the origin	ginal and one copy of t	he articles.

or or

# 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:

MARTINEZ AND MENDELSON INC.

### ARTICLE II PRINCIPAL OFFICE

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

7252 nw 25th st MIAMI FL 33122



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

ten

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

630 Oriole Ave Miami Springs Fl 33166

#### ARTICLE V INCORPORATOR

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

Fernando Martinez 630 Oriole ave Miami Springs Fl 3316

Signature/Incorporator

(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 standards 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