

P990000 92123
TRANSMITTAL LETTER

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

100003017061--6
-10/18/99-01093-001
*****78.75 *****78.75

SUBJECT: A+M MARKETING SERVICES, INC.
(Proposed corporate name - must include suffix)

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 of Status

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: SANFORD SCHNEIDER
Name (Printed or typed)

2200 NW 15TH AVENUE
Address

POMPANO BEACH, FL 33069
City, State & Zip

(954) 984-4100
Daytime Telephone number

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

CB
10-20-99
2

FILED
OCT 18 AM 11:15
TALLAHASSEE FLORIDA

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:

A & M Marketing Services, Inc.

ARTICLE II PRINCIPAL OFFICE

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

3420 South Ocean Blvd.
Suite 9T
Highland Beach, Florida 33487.

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

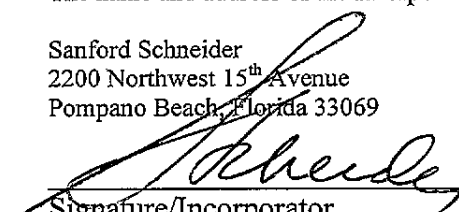
The name and Florida street address of the initial registered agent are:

Sanford Schneider
2200 Northwest 15th Avenue
Pompano Beach, Florida 33069

ARTICLE V INCORPORATOR

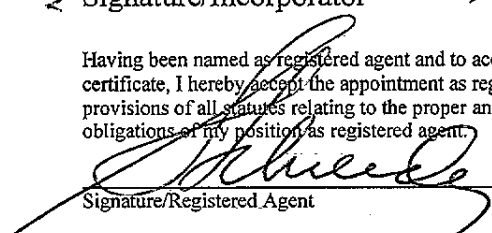
The name and address of the incorporator to these Articles of Incorporation are:

Sanford Schneider
2200 Northwest 15th Avenue
Pompano Beach, Florida 33069


Signature/Incorporator

10/5/99
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 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

10/5/99
Date

FILED
99 OCT 18 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA