

P/5000094302

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

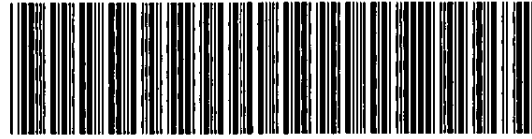
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/12/15--01032--010 **78.75

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SECRETARY OF STATE
15 NOV 12 PM 3:33
DIVISION OF CORPORATIONS

EFFECTIVE DATE 11/12/15

11/23/15

COVER LETTER

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

SUBJECT: M8 ALTERNATIVE CONSTRUCTION INC.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are 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: MICHAEL MCCABE

Name (Printed or typed)

9641 Riverside Drive 1

Address

Sebastian, Florida, 32958

City, State & Zip

772-473-2147

Daytime Telephone number

michaelmccabe7@comcast.net

E-mail address: (to be used for future annual report notification)

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

M8 ALTERNATIVE CONSTRUCTION INC.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

9641 RIVERSIDE DRIVE 1

SEBASTIAN, Florida 32958

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Providing support, consultation, programing, review and recommendations for alternative construction methods and systems.

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THE STATE OF FLORIDA
CORPORATION DIVISION
NOV 12 PM 3:33

ARTICLE IV SHARES

1000

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michael McCabe PD

Name and Title: Gavin McCabe T

Address: 9641 riverside drive 1
Sebastian, fl 32958

Address: 5780 Glen Eagle Lane
Vero Beach Fl, 32967

Name and Title: Erin McCabe VP

Name and Title:

Address: 970 Bungalow court
Fort Collins ,Co 80521

Address:

Name and Title: Nicholas McCabe S

Name and Title:

Address: 5780 Glen Eagle Lane
Vero Beach Fl 32967

Address:

Name and Title: _____ Name and Title: _____
 Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:

Name: Michael McCabe
 Address: 9641 Riverside Drive 1
 Sebastian Fl, 32958

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Michael McCabe
 Address: 9641 riverside drive 1
 sebastian fl 32958

FILED
 SUPERVISOR OF STATE
 CORPORATE OPERATIONS
 15 NOV 12 PM 3:33

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 11-12-2015. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Michael McCabe 11-7-2015
 Required Signature/Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Michael McCabe 11-7-2015
 Required Signature/Incorporator Date