

P1100000463/6

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SC  
5-16-11

## COVER LETTER

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

SUBJECT: Camp by Maxine, 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: Jorge A. Alvarez  
Name (Printed or typed)

1222 GENOA STREET  
Address

Coral Gables, FL 33134  
City, State & Zip

305-615-2921  
Daytime Telephone number

MCEGABLES@AOL.COM.  
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE  
TALLAHASSEE, FL 32301

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**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

The name of the corporation shall be: CAMP BY MAXINE, INC

## ARTICLE II PRINCIPAL OFFICE

Principal street address

2701 Indian Mound Trail  
Coral Gables, FL 33134

Mailing address, if different is:

1222 Genoa St.  
Coral Gables, FL 33134

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ORGANIZE AND MANAGE A SUMMER CAMP.

## ARTICLE IV SHARES

The number of shares of stock is: 100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MAXINE MITCHELL  
Address: 1222 GENOA STREET  
Coral Gables, FL 33134

PRESIDENT

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: Jorge A. Alvarez, VP & TREASURER  
Address: 1222 GENOA STREET  
Coral Gables, FL 33134

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

## ARTICLE VI REGISTERED AGENT

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

Name: Jorge A. Alvarez  
Address: 1222 GENOA STREET  
Coral Gables, FL 33134

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jorge A. Alvarez  
Address: 1222 GENOA STREET  
Coral Gables, FL 33134

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

[Signature]  
Required Signature/Registered Agent

5-10-2011  
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.

[Signature]  
Required Signature/Incorporator

5-10-2011  
Date

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TALLAHASSEE, FLORIDA