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03 MAY -8 AM 9:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT: FIMAX, 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: YEFIM MAKSUMOV
Name (Printed or typed)

7850 NW 54 Ct.
Address

Lauderhill FL 33351
City, State & Zip

954-232-4169
Daytime Telephone number

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:

FIMAX, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7850 NW 54 Ct
Lauderhill, FL 33351

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

500 at \$1p; V;

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

YEFIM MAKSUMOV
7850 NW 54 Ct.
Lauderhill, FL 33351

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

YEFIM MAKSUMOV
7850 NW 54 Ct.
Lauderhill, FL 33351

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

YEFIM MAKSUMOV
7850 NW 54 Ct.
Lauderhill, FL 33351

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/Registered Agent

Date

Signature/Incorporator

Date

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TALLAHASSEE, FLORIDA