

Division of Corporations

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# F19000002804

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : BLUMBERG/EXCELSTOR CORPORATE SERVICES, INC.  
Account Number : 075350000353  
Phone : (800) 221-2972  
Fax Number : (718) 889-7420

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

## FOREIGN PROFIT/NONPROFIT CORPORATION MAXIMUM BENEFITS GROUP, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

 SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

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JUN 18 2019



June 17, 2019

FLORIDA DEPARTMENT OF STATE

Division of Corporations  
BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

SUBJECT: MAXIMUM BENEFITS GROUP INC  
REF: W19000056913

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Brooke N Kinsey  
Regulatory Specialist II

FAX Aud. #: H19000187480  
Letter Number: 819A00012024

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

MAXIMUM BENEFITS GROUP, INC.

1. MAXIMUM BENEFITS GROUP, INC.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New Jersey 3. 81-0693901  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/24/2013 5. Perpetual  
(Date of incorporation) (Date of duration, if other than perpetual)

6. Upon Filing  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 11872 Cantal Circle South Parkland, FL 33076  
(Principal office address)

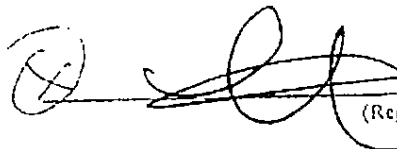
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Greg P. Giordano  
Office Address: 11872 Cantal Circle South  
Parkland, Florida 33076  
(City) (Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

  
(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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## 11. Names and business addresses of officers and/or directors:

## A. DIRECTORS

Chairman: Greg P. GiordanoAddress: 11872 Cantal Circle South Parkland, FL 33076

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

## B. OFFICERS

President: Greg P. GiordanoAddress: 11872 Cantal Circle South Parkland, FL 33076

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. 

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

13. Greg P. Giordano - President

(Typed or printed name and capacity of person signing application)

1111  
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STATE OF FLORIDA  
TALLAHASSEE, FL 32310

**STATE OF NEW JERSEY  
DEPARTMENT OF THE TREASURY  
DIVISION OF REVENUE AND ENTERPRISE SERVICES  
SHORT FORM STANDING**

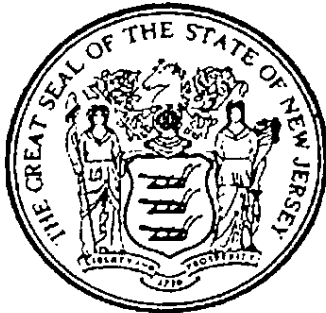
**MAXIMUM BENEFITS GROUP, INC.**  
0450033384

*I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on November 24, 2015.*

*As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.*

*I further certify that the registered agent and office are:*

GREG GIORDANO  
TRUMP PLAZA WEST  
88 MORGAN ST SUITE 2402  
JERSEY CITY, NJ 07302



*IN TESTIMONY WHEREOF, I have  
hereunto set my hand and affixed  
my Official Seal at Trenton, this  
14th day of June, 2019.*

Elizabeth Maher Muoio  
State Treasurer

Certificate Number : 6098201407

Verify this certificate online at

[https://www01.state.nj.us/TYTR\\_StandingCert/JSF/Verify\\_Cert.jsp](https://www01.state.nj.us/TYTR_StandingCert/JSF/Verify_Cert.jsp)