

TRANSMITTAL LETTER

P00000019294

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

FILED
00 FEB 21 PM 4:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA

SUBJECT: Inkmax Inc.
(Proposed corporate name - must include suffix)

500003141855--6
-02/21/00--01122--009
*****87.50 *****87.50

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: Inkmax Inc. (Galeet Levy)
Name (Printed or typed)

11523 NW 6th Ct
Address

Coral Springs FL 33071
City, State & Zip

954-969-9930 x 203
Daytime Telephone number

Galeet Levy GIVE
AUTHORIZATION BY PHONE TO
CORRECT remove one person as RA two people were listed
DATE 2/23
DOC. EXAM stt

S. Thompson FEB 23 2000

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

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:

Inkmax Inc.

ARTICLE II PRINCIPAL OFFICE

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

11523 NW 6th ct
Coral Springs FL 33071

ARTICLE III SHARES

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Galeet Levy 11523 NW 6th ct
Coral Springs FL 33071

ARTICLE V INCORPORATOR

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

Galeet Levy
11523 NW 6 ct
Coral Springs FL 33071


Signature/Incorporator

2/15/00
Date

(An additional article must be added if an effective date is requested.)

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

2/15/00
Date

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00 FEB 21 PM 1:17
SECRETARY OF STATE
TALLAHASSEE FLORIDA