

PO0000048376

TRANSMITTAL LETTER

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

SUBJECT: Axxess MPD Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

000003248840--5
-05/11/00--01083--006
*****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: Chris T. Kikis
Name (Printed or typed)
709 Lighthouse Drive
Address
Tarpon Springs Florida 34689
City, State & Zip
727-937-0882
Daytime Telephone number

FILED
DO MAY 11 AM 11:13
SECRETARY OF STATE
TALLAHASSEE, FL 09012

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

5-16
WC

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:

Axxess MPD Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

709 Lighthouse Drive, Tarpon Springs Florida 34689

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in lawful business activity in the state of Florida or any other territory or country.

ARTICLE IV SHARES

The number of shares of stock is:

The maximum number of shares of common stock is 1000 at \$1.00 par value.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Chris T. Kikis
President

709 Lighthouse Drive, Tarpon Springs Florida 34689

ARTICLE VI REGISTERED AGENT

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

Chris T. Kikis

709 Lighthouse Drive Tarpon Springs Florida 34689

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Kevin J. Frieders
2108 Tarpon Landings Drive
Tarpon Springs Florida 34689

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

FILED
00 MAY 11 AM 11:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA