

P 01000100461

TRANSMITTAL LETTER

FILED  
01 OCT 15 AM 8:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

100004635861--9  
-10/15/01--01026--003  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: MAX STREMMER & ASSOC. 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: MAX STREMMER  
Name (Printed or typed)

9 NE 19th CT # 201C  
Address

WILTON MANORS FL 33305  
City, State & Zip

954-565-2821  
Daytime Telephone number

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

Max Stremmer GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT ADD SUFFIX  
DATE 10-17-01  
DOC. EXAM CB

OCT 17 2001

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

MAX Stremme & Assoc, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

9 NE 19th CT #201C  
WILTON MANORS FL 33305

954-565-2821

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

SERVICES - BUSINESS OR THEIR HOME (only answer calls + COMPUTER WORK)  
NO SERVICES AT RESIDENCE  
CONSULTING & Secretarial

**ARTICLE IV SHARES**

The number of shares of stock is:

500

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s), address(es) and title(s):

MAX STREMMER  
PRESIDENT & Entrepreneur

**ARTICLE VI REGISTERED AGENT**

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

MAX STREMMER  
9 NE 19th CT #201C  
WILTON MANORS FL 33305

954-565-2821

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

MAX STREMMER  
9 NE 19th CT #201C  
WILTON MANORS FL 33305

\*\*\*\*\*  
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

Max Stremme President 7-30-01  
Signature/Registered Agent Date

Max Stremme President 7-30-01  
Signature/Incorporator Date