

P02000010277

Florida Department of State
Division of Corporations
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Katherine Harris, Secretary of State

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To:

Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : INCORPORATETIME.COM, INC.
Account Number : I19990000221
Phone : (631) 224-9004
Fax Number : (631) 224-7979

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FLORIDA PROFIT CORPORATION OR P.A.

Maxcom General Contractors Inc.

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

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ARTICLES OF INCORPORATION

***THE UNDERSIGNED INCORPORATION 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:

Maxcon General Contractors Inc.

ARTICLE II -PRINCIPAL OFFICE

The principal place of business & mailing address of this corporation shall be

13796 Barberry Drive
Wellington FL 33414

ARTICLE III -SHARES

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

2,000 shares at \$.01 par value

ARTICLE IV -INITIAL OFFICERS/DIRECTORS:

President/Director: Manuel Alejandro Lopez, 13796 Barberry Drive, Wellington,
FL 33414

Vice President/

Director: Cheryl Lynn Lopez, 13796 Barberry Drive, Wellington, FL
33414

ARTICLE V -INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

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FROM : CTE

FAX NO. :

Jan. 28 2002 03:32PM P2

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Manuel A. Lopez
13766 Barbary Dr., Wellington FL 33414

ARTICLE VII-INCORPORATOR:

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

Kerry Walsh
incorporatime.com, Inc.
35-37 Carleton Avenue
Islip Terrace, NY 11752

KWalsh
Kerry Walsh, Incorporator

1-29-02
Date

Having been named registered agent and to accept service of process for the above stated corporation as 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 familiar with and accept the obligations of my position as registered agent.

M. Lopez
Manuel A. Lopez, Registered Agent

1-28-02
Date

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