

PO2000121751

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

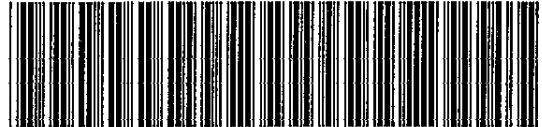
(Document Number)

Certified Copies _____

Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

SE
11/14

TRANSMITTAL LETTER

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

SUBJECT: Maze Consulting, 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: Candice L. Maze

Name (Printed or typed)

2474 SW 24th Terrace

Address

Miami, Florida 33145

City, State & Zip

305.772.0708

Daytime Telephone number

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

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:

Maze Consulting, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2474 SW 24th Terrace
Miami, Florida 33145

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide program development and consulting services to programs that serve the legal, social or emotional needs of children and families.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Candice L. Maze - President/Treasurer
2474 SW 24th Terrace
Miami, Florida 33145

ARTICLE VI REGISTERED AGENT

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

Candice L. Maze
2474 SW 24th Terrace
Miami, Florida 33145

ARTICLE VII INCORPORATOR

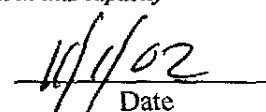
The name and address of the Incorporator is:

Candice L. Maze
2474 SW 24th Terrace
Miami, Florida 33145

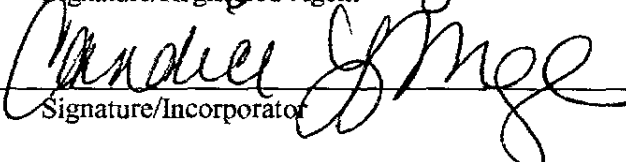
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



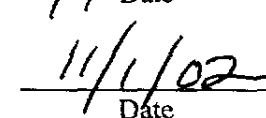
Signature/Registered Agent



Date



Signature/Incorporator



Date

FILED
02 NOV 12 AM 3:02
SECRETARY OF STATE
TALLAHASSEE FLORIDA