

PO3000111716

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

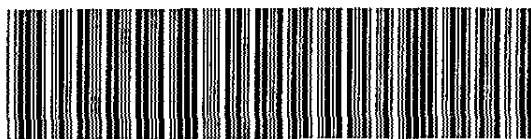
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Certified Copies _____

Certificates of Status _____

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03 OCT -6 PM 3:33
TALLAHASSEE, FLORIDA

✓
10/9/03

TRANSMITTAL LETTER

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

SUBJECT: MAX PRODUCE 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Maximo Morillo
Name (Printed or typed)

14223 SW 153 Terr
Address

Miami, FL 33177
City, State & Zip

786-242-9837
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:

MAX PRODUCE INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

17100 SW 197 AVE

Miami, Fl 33168

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Wholesale trading and distribution of fresh produce.

ARTICLE IV SHARES

The number of shares of stock is:

100,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Maximo Morillo	President / Secretary	14223 SW 153 Terr.
Ana Morillo	Vice President / Treasurer	Miami, Fl 33177

ARTICLE VI REGISTERED AGENT

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

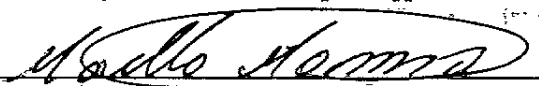
Maximo Morillo
17100 SW 197 Ave.
Miami, Fl 33168

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Maximo Morillo
17100 SW 197 Ave.
Miami, Fl 33168

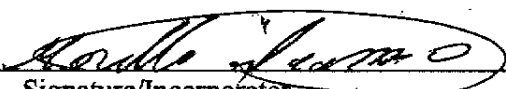
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

10/3/03

Date



Signature/Incorporator

10/3/03

Date

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA