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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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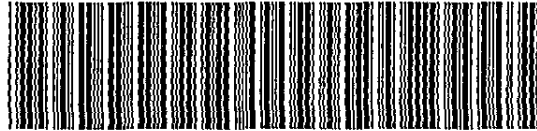
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: MAX Strozier 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: MAX Strozier
Name (Printed or typed)

8 unison court
Address

Palm coast FL 32164
City, State & Zip

(386) 295-2097
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 Strozier INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8 UNISON Ct Palm coast Florida
32164

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The corporation shall engage in any activity or Business permitted
under the united states and of the state of Florida

ARTICLE IV SHARES

The number of shares of stock is:

The maximum number of Shares this corporation is authorized to have outstanding
is seven thousand Five hundred Shares of common stock Each Share having the pure
value of one dollar (1)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

(president) MAX Strozier (Secretary) MAX Strozier (Treasurer) MAX Strozier
(Director) MAX Strozier
Addresses shall be the same as the principal
office of the corporation

ARTICLE VI REGISTERED AGENT

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

MAX Strozier 8 UNISON Ct Palm coast Florida
32164

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MAX Strozier 8 UNISON Ct Palm coast Florida
32164

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 Strozier MAX Strozier
Signature/Registered Agent

FEB 6 2004
Date

Max Strozier MAX Strozier
Signature/Incorporator

FEB 6 2004
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA