

Apr 08 04 02:09p
Division of Corporations

ECFS

305-444-4977

p. 1

P04000060858

Florida Department of State
Division of Corporations
Public Access System

Page 1 of 1
04 APR -8 AM 11:22
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H04000075086 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.
Account Number : I20000000146
Phone : (305) 444-4994
Fax Number : (305) 444-4977

FLORIDA PROFIT CORPORATION OR P.A.

2-D-MAX PROMOTIONS CORP

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing

Public Access Help

(H04000075086)

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:

2-D-MAX Promotions Corp.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*411 NW 59 Ave
Miami Fl. 33126*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

*For promotional activities
For motorcycle Riders.*

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

*Olivia Almanza (President owner)
411 NW 59 Ave.
Mia, Fl. 33126*

ARTICLE VI REGISTERED AGENT

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

*Olivia Almanza
411 NW 59 Ave.
Mia, Fl. 33126*

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

*Olivia Almanza
411 NW 59 Ave.
Mia Fl. 33126*

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

X *Olivia Almanza*
Signature/Registered Agent

4-8-04
Date

X *Olivia Almanza*
Signature/Incorporator

4-7-04
Date

04 APR -8 AM 11:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED