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TRANSMITTAL LETTER

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

SUBJECT: Silver	r Maple Company		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an or	iginal and one (1) copy of the arti	cles 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
		ADDITIONAL CO	Status
			,
FROM: _	Brian K. Johnson Name (Printed or typed)		
	Name	(Printed or typed)	
	2334 NW 60th Street		
		Address	
	Boca Raton, FL 33496		
		State & Zip	
	954-328-8211		
	Daytime To	elephone 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)

FILED

NAME ARTICLE I

The name of the corporation shall be:

Silver Maple Company

04 AUG 30 PM 3: 57

SECRETART OF STATE TALLAHASSEE, FLORIDA

this

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 2334 NW 60th Street Boca Raton, FL 33496

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Consulting and other related word

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):

Brian K. Johnson Managing Director 2334 NW 60th Street Boca Raton, FL 33496

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Brian K. Johnson 2334 NW 60th Street Boca Raton, FL 33496

INCORPORATOR ARTICLE VII

The name and address of the Incorporator is:

Brian K. Johnson 2334 NW 60th Street Boca Raton, FL 33496

*****************	************
Having been named as registered agent to accept service of process j certificate, I am familiar with and accept the appointment as registered	for the above stated corporation at the place designated in th d agent and agree to act in this capacity
Bulth	8/14/04
Signature/Registered Agent	Date
Buk She	3/4/n
Signature/Incorporator	Date