

P04000126895

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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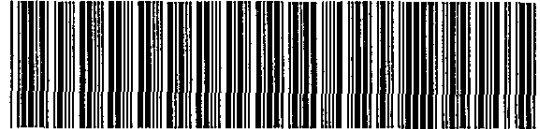
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04 SEP -2 AM 10:36

TRANSMITTAL LETTER

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

SUBJECT: MaceMan Inc. (MMI)
(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: John F. Maciarz
Name (Printed or typed)
9300 Wickham Way
Address
Orlando, Florida 32836
City, State & Zip
407/721-5571
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)

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ARTICLE I NAME

The name of the corporation shall be:

MaceMan Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

9300 Wickham Way
Orlando, Florida 32836

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide Sales, Marketing, Public Relations and Consulting Services

ARTICLE IV SHARES

The number of shares of stock is:

10,000 (ten thousand)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

John F. Maciarz - President
9300 Wickham Way
Orlando, Florida 32836

John F. Maciarz - Secretary/Treasurer
9300 Wickham Way
Orlando, Florida 32836

ARTICLE VI REGISTERED AGENT

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

John F. Maciarz
9300 Wickham Way
Orlando, Florida 32836

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

John F. Maciarz
9300 Wickham Way
Orlando, Florida 32836

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

9-1-04

Date



Signature/Incorporator

9-1-04

Date