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(Requestor's Name)	
(Address)	
, ,	
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(City(Obsta 17), 101-202 40	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Sta	atus
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COVER LETTER

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

SUBJECT: Mayrick team I IC (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
Enclosed are an orig	ginal and one (1) copy of the artic	les of incorporation and	l a check for:	
1 670 00	X \$78.75	☐ \$78.75	\$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
r ming r vo	& Certificate of Status	& Certified Copy	Certified Copy	
	to Continue of China	w common copy	& Certificate of	
			Status	
		ADDITIONAL CO	PY REQUIRED	
FROM: MERRICK REID Name (Printed or typed)				
Name (Printed or typed)				
14260 NE 12 AVE				
Address				
1 1				
North Miami & Lorda 33/6/				
Citý, State & Zip				
305-612-2387				
Davtime Telephone number				
Dayanne Telephone marinet				

NOTE: Please provide the original and one copy of the articles.

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME The name of the corporation shall be:	FILED
	- -
MAVrickteam, Inc	2006 MAR 23 PM 2: 46
ARTICLE II PRINCIPAL OFFICE	SECRETARY OF STATE TALLAHASSEE, FLORIDA
The principal place of business/mailing address is:	THE THIRD SEE, FLORIDA
NOTh Miami, FL 33/61	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
All legal Business	
ARTICLE IV SHARES	
The number of shares of stock is:	
1,000	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s):	
Merrick Reid, 14260 NE 12 HIG NOTH W	nighair and a
Merrick Reid, 14260 NF 1244 GONTHA	My 023316) Tresiclen
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the	registered agent is:
Merick Reid	
14260 NE 12 AVE	
North Minmit 33/61	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Mamicle Read	
NOVIL MIAMI, KL 33/61	
Having been named as registered agent to accept service of process for the above state	**************************************
certificated I am familiar with and accept the appointment as registered agent and agree	to act in this capacity
r L	3/20/06 Date 3/20/06
Signature/Registered Agent	Date
- M	5/20/08
Signature/Incorporator	Date