

Mar 23 2007 3:07PM

CORPORATE SERVICES

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Division of Corporations

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To:

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

From:

Account Name : A 1 A CORPORATE SERVICES, INC.  
Account Number : I20010000247  
Phone : (800)494-3124  
Fax Number : (305)675-2811

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SECRETARY OF STATE  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
TO THE MAX TAX PROFESSIONALS INC.**

Certificate of Status	0
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## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### **ARTICLE I NAME**

The name of the corporation shall be :  
**TO THE MAX TAX PROFESSIONALS INC.**

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is :

2924 W MISSIONWOOD CIRCLE

MIRAMAR FL 33025

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is to engage in any activity business permitted under the laws of the State of Florida.

### **ARTICLE IV SHARES**

The number of shares of stock is:  
1,500 COMMON SHARES PAR VALUE \$.01

### **ARTICLE V INITIAL OFFICERS / DIRECTORS**

The name(s), address(es), and title(s) of the directors and officers is/are:

Director, President & Vice-President:

PAULA PATRICE  
2924 W MISSIONWOOD CIRCLE  
MIRAMAR FL 33025

Secretary:

MAREZ FINGAL  
2924 W MISSIONWOOD CIRCLE  
MIRAMAR FL 33025

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**ARTICLE VI REGISTERED AGENT**

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

PAULA PATRICE  
2924 W MISSIONWOOD CIRCLE  
MIRAMAR FL 33025

**ARTICLE VII INCORPORATOR**

The name and Florida street address of the incorporator is:

PAULA PATRICE  
2924 W MISSIONWOOD CIRCLE  
MIRAMAR FL 33025

\*\*\*\*\*

*Having been named as registered agent to accept service of process for the above 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.*

  
\_\_\_\_\_  
PAULA PATRICE / Registered Agent

3.23.07  
Date

  
\_\_\_\_\_  
PAULA PATRICE / Incorporator

3.23.07  
Date

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