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(Re	equestor's Name)	 		
(Ac	idress)			
(Ac	ddress)			
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
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COVER LETTER

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

SUBJECT: TI	RANSMAX INC.		
	(PROPOSED CORPORAT	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the artic	les of incorporation and	a check for:
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM:	JEFF BROOKS	Printed or typed)	
	3370 NE 190TH ST	REET,APT 23	14
	AVENTURA,FLO	PRIDA 33180 State & Zip	
	(305)978-9155 Daytime Te	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)

ARTICLE I NAME

The name of the corporation shall be:

TRANSMAX INC.

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 3370 NE190TH STREET #2314 AVENTURA,FLORIDA 33180

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
TO CONDUCTANY AND ALL LEGAL BUSINESS WITHIN THE STATE OF FLORIDA,
THE UNITED STATES OF AMERICA ANDANY INTERNATIONAL COUNTRY

ARTICLE IV SHARES

The number of shares of stock is:

ONE HUNDRED MILLION SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JEFF BROOKS, PRE, SEC-TRES.

<u>ARTICLE VI REGISTERED AGENT</u>

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: JEFF BROOKS 3370 NE 190TH STREET,#2314,AVENTURA,FLORIDA 33170

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: JEFF BROOKS

3370 NE 190TH STREET #2314,AVENTURA, FLORIDA 33180

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SECRETARY OF STATE