

P08000007559

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

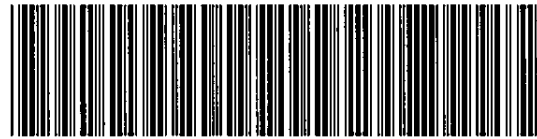
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100115479071

01/23/08--01009--013 \*\*78.75

RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

08 JAN 23 AM 10:45

RECEIVED

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

08 JAN 23 AM 10:48

FILED

C.F. 1-23

## COVER LETTER

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

SUBJECT: MAESTRO MAESTRA INC  
(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: SAVANNA L- LINDSEY  
Name (Printed or typed)

2300 OLD LAKE MARY RD.  
Address

SANFORD FL. 32771  
City, State & Zip

480-6199648  
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)

FILED

08 JAN 23 AM 10:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLE I NAME

The name of the corporation shall be:

MAESTRO MAESTRA INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2300 OLD LAKE MARY RD. UNIT CDE  
SANFORD, FLORIDA 32771

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

DESIGN WEB SITES AND PLAN MARKETING AND PROMOTIONS  
OF COMPANY BRANDING. BROADCASTING AND PRINT MEDIA.  
OUT DOOR BUILD BOARD AND SIGNAGE.

## ARTICLE IV SHARES

The number of shares of stock is: /

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

SAVANA L. LINDSEY PRESIDENT / CEO

KELVIN D. LINDSEY VICE PRESIDENT

## ARTICLE VI REGISTERED AGENT

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

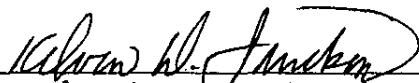
KELVIN D. LINDSEY  
2300 OLD LAKE MARY RD UNIT CDE  
SANFORD, FLORIDA 32771

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SAVANA L. LINDSEY  
2300 OLD LAKE MARY RD. UNIT CDE  
SANFORD, FLORIDA 32771

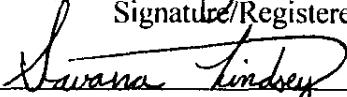
\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

1-20-2008

Date



Signature/Incorporator

1-20-2008

Date