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SECRETARY OF STATE OLVISION OF CORPORATION

EP 4/23/08

COVER LETTER

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

SUBJECT: Max	imo Partners, Incorpora	ted	LINE OVEREN
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an original	ginal and one (1) copy of the art	icles 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 CO	PY REQUIRED
FROM:	William R. Mellon Name 4035 49th Avenue South	(Printed or typed)	**************************************
	4035 49th Avenue South Address		
Saint Petersburg, Florida 33711 City, State & Zip			
	727-421-4848	Telephone number	
	Daytille	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)

ARTICLE I NAME

The name of the corporation shall be:

Maximo Partners, Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 4035 49th Avenue South Saint Petersburg, Florida 33711

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any activity and business permitted under the laws of the United States and the State of Florida

ON APR 21 PH 1: 16

ARTICLE IV SHARES

The number of shares of stock is: 1,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): William R. Mellon President 4035 49th Avenue South Saint Petersburg, Florida 33711

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: William R. Mellon

4035 49th Avenue South Saint Petersburg, Florida 33711

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: William R. Mellon 4035 49th Avenue South Saint Petersburg, Florida 33711

Having been named as registered agent to accept service of process for certificate, I am familiar with and accept the appointment as registered ag	
	em unu ugree to act in this capacity
William R Mellon	4/19/2008
William / Willan	4/18/2008
Signature/Registered Agent	Date

Mollan 4/18/200

Signature/Incorporator