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(Address)

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(Business Entity Name)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 APR 21 PM 1:16

EP 4/23/08

**COVER LETTER**

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

**SUBJECT: Maximo Partners, Incorporated**  
**(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: William R. Mellon  
Name (Printed or typed)

4035 49th Avenue South  
Address

Saint Petersburg, Florida 33711  
City, State & Zip

727-421-4848  
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)

**ARTICLE I NAME**

The name of the corporation shall be:

Maximo Partners, Incorporated

**ARTICLE II PRINCIPAL OFFICE**

The principal street 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

**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 name and Florida street address (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 name and address 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 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

4/18/2008  
Date

  
\_\_\_\_\_  
Signature/Incorporator

4/18/2008  
Date

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DIVISION OF CORPORATIONS  
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