

P10000036966

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

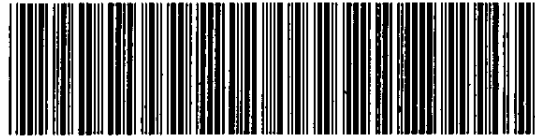
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

SUBJECT: Amax Construction Corp.

(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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Mehrdad Shahgodari

Name (Printed or typed)

3361 SW Mundy street

Address

Port Saint Lucie, FL 34953

City, State & Zip

(561) 633-2483

Daytime Telephone number

amaxconstcorp@yahoo.com

E-mail address: (to be used for future annual report notification)

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:

Amax Construction Corp.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

3361 SW Mundy street
Port Saint Lucie, FL 34953

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

General Contractor

ARTICLE IV SHARES

The number of shares of stock is:

100..

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Mehrdad Shahgodari (President)
3361 SW Mundy St
Port Saint Lucie, FL
34953

ARTICLE VI REGISTERED AGENT

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

Mehrdad Shahgodari
3361 SW Mundy St
Port Saint Lucie, FL 34953

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Mehrdad Shahgodari
3361 SW Mundy St
Port Saint Lucie, FL 34953

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

Signature/Incorporator

Date

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Amax Construction Corp.
3361 SW Mundy Street
Port Saint Lucie, Florida 34953
(561) 633-2483
Amaxconstcorp@yahoo.com

To: Department of state
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Starting a new Florida corporation and dissolving existing corporation.

Please be advised that the undersigned the sole proprietor, officer and president of AMAX CONSTRUCTION CORP. with document Number# P06000108467; wishes to dissolve the existing corporation, has no intention of reinstating it; thereby, releases the name so that it may be used for the new entity under the very same name.

Thanking you much in advance

Mehrdad Shahgodary
President

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amax Construction Corp.
3361 SW Mundy Street
Port Saint Lucie, Florida 34953
(561) 633-2483
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To: Department of state
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Starting a new Florida corporation and dissolving existing corporation.

Please be advised that the undersigned the sole proprietor, officer and president of AMAX CONSTRUCTION CORP. with document Number# P06000108467; wishes to dissolve the existing corporation and start a new one under the very same name.
Enclosed, you shall find the application for new Florida Corporation, original, and a copy of articles of incorporation, and a money order for an amount of \$70.00.
Your cooperation in this matter is greatly appreciated.

Thanking you; much in advance,

Mehrdad Shahgodary
President

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE