

P10000085635

Division of Corporations

Page 1

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H10000229017 3)))



H100002290173ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:  
Division of Corporations  
Fax Number : (850) 617-6381

From:  
Account Name : FASTKIT CORP  
Account Number : I20100000009  
Phone : (305) 599-0839  
Fax Number : (305) 592-9591

RECEIVED  
FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

20 OCT 19 PM 2:49

FILED

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

FLORIDA PROFIT/NON PROFIT CORPORATION  
MAXIM MANUFACTURING, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

RECEIVED  
FLORIDA DEPARTMENT OF STATE  
10 OCT 19 PM 3:53

10 OCT 20 2010

**ARTICLES OF INCORPORATION  
OF  
MAXIM MANUFACTURING, INC.**

---

ARTICLE I

THE NAME OF THE CORPORATION IS:  
**MAXIM MANUFACTURING, INC.**

---

ARTICLE II

THE CORPORATION MAY ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED  
UNDER THE LAWS OF THE UNITED STATES AND UNDER THE LAWS OF THE STATE OF  
FLORIDA.

ARTICLE III

THE MAXIMUM NUMBER OF SHARES OF CAPITAL STOCK THAT THE  
CORPORATION IS AUTHORIZED TO ISSUE IS 100 SHARES AT \$10.00 PER VALUE.

ARTICLE IV

THE AMOUNT OF CAPITAL WITH WHICH CORPORATION WILL BEGIN BUSINESS IS  
THE SUM OF \$1,000.00.

ARTICLE V

THE CORPORATION SHALL HAVE PERPETUAL EXISTENCE UNLESS SOONER  
DISSOLVED ACCORDING TO LAW, AND ITS EXISTENCE SHALL COMMENCE UPON FILING.

ARTICLE VI

THE STREET ADDRESS IS THE PRINCIPAL OFFICE OF THE CORPORATION, IN THIS  
STATE SHALL BE:

737 N.W. 135 AVENUE  
PEMBROKE PINES, FLORIDA 33028

ARTICLE VII

THE NAME (S) AND STREET ADDRESS(ES) OF THE PERSON SIGNING THESE  
ARTICLES ARE:

JONATHAN A. MARTY  
737 N.W. 135 AVENUE  
PEMBROKE PINES, FLORIDA 33028

TUSCANY N. OROCIO  
7911 N.W. 3<sup>RD</sup>. STREET, # 103 BLD. #18  
PEMBROKE PINES, FLORIDA 33024

FILED  
OCT 19 PM 2:49  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE VIII

THE CORPORATION SHALL HAVE A BOARD OF DIRECTORS CONSISTING OF NOT LESS THAN TWO OR MORE THAN SIX DIRECTORS. THE INITIAL BOARD OF DIRECTORS SHALL CONSIST OF ONE DIRECTOR WHOSE NAME AND ADDRESSE ARE AS FOLLOW:

JONATHAN A. MARTY - PRESIDENT  
737 N.W. 135 AVENUE.  
PEMBROKE PINES, FLORIDA 33028

TUSCANY N. OROCIO - VICE-PRESIDENT  
7911 N.W. 3rd. STREET, #103 BLD. #18  
PEMBROKE PINES, FLORIDA 33024


JUAN A. MARTY - SECRETARY  
737 N.W. 135 AVENUE  
PEMBROKE PINES, FLORIDA 33028

ARTICLE IX

THE STREET ADDRESS OF THE INITIAL REGISTERED OFFICE, AND THE NAME OF THE INITIAL REGISTERED AGENT AT THAT ADDRESS SHALL BE:

JONATHAN A. MARTY  
737 N.W. 135 AVENUE  
PEMBROKE PINES, FLORIDA 33024

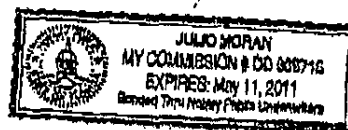
THE UNDERSIGNED HAS (HAVE) EXECUTED THESE ARTICLES OF INCORPORATION THIS 18 DAYS OF OCTOBER, 2010.

  
JONATHAN A. MARTY  
Incorporator  
Date 10/18/10

  
TUSCANY N. OROCIO  
Incorporator  
Date 10/18/10

Sworn to and subscribed to Before me  
This 18 day of October 2010

  
Julio Moran, Notary Public - State of Florida



FILED

2010 OCT 19 PM 2:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT / REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/ registered agent, in the State of Florida.

1. The name of the corporation is: **MAXIM MANUFACTURING, INC..**

2. The name and address of the registered agent and office is:

**JONATHAN A. MARTY**

**737 N.W. 135 AVENUE**

**PEMBROKE PINES, FLORIDA, 33028**

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

*[Signature]*  
JONATHAN A. MARTY

DATE: 10/18/10

Sworn to and subscribed to Before me  
This 18 day of October 2010

*[Signature]*  
Julio Moran, Notary Public - State of Florida

