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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRS  
9/6

## COVER LETTER

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

SUBJECT: MAXTOR ALLIANCE CORPORATION  
(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: Alexandra Paquin  
Name (Printed or typed)

3001 NE 185 St. Apt. 222  
Address

Aventura, FL, 33180  
City, State & Zip

305 394 9289  
Daytime Telephone number

alpaquin@gmail.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)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

MAXTOR ALLIANCE CORPORATION

The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal ~~street~~ address

3001 NE 185 St. Apt. 222

Aventura, FL 33180

Mailing address, if different

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The purpose of this corporation is to carry out any trade, import and export consumer goods and to transact in ANY and ALL lawful business.

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000 shares with a par value of \$ 0.01 each.

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Alejandro Paquin - Director

Address: 3001 NE 185 St. Apt. 222

Aventura, FL 33180

Name and Title: Helena Victoria Paquin - Director

Address: 3001 NE 185 St. Apt. 222

Aventura, FL 33180

Name and Title: Helen Paquin Suarez - Director

Address: 3001 NE 185 St. Apt. 222

Aventura, FL 33180

Name and Title:

Address:

Name and Title: Alexandra Paquin - Director

Address: 3001 NE 185 St. Apt. 222

Aventura, FL 33180

Name and Title:

Address:

**ARTICLE VI REGISTERED AGENT**

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

Name: Alexandra Paquin

Address: 3001 NE 185 St. Apt. 222

Aventura, FL 33180

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Alexandra Paquin

Address: 3001 NE 185 St. Apt. 222

Aventura, FL 33180

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

Required Signature Registered Agent

09/23/2011

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature Incorporator

09/23/2011

Date