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## **COVER LETTER**

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

SUBJECT: MONTIS MAXIMUS, IN	IC. TE NAME – MUST INCLUDE SUFFIX)		
Enclosed are an original and one (1) copy of the artic	<del>.</del>		
\$70.00 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee, & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED		
FROM: W. Rodgers Moore, Esq.	(Printed or typed)		
1900 Glades Rd., Suite	101 Address	201	91 <b>V</b> 3:
Boca Raton, FL 33431 City,	State & Zip	ZD11 OCT 25	ECRETAR SION OF C
561-394-7944  Daytime To	elephone number	PH 2:	Y OF STATE
wrmoorelaw@gmail.com E-mail address: (to be used	for future annual report notification) ,	05	

 $\dot{N}OTE$ : 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)

5

ARTICLE I	NAME MONTIS MAXIMUS, IN	IC. DIXISIUN OF GURPOKATH
The name of the	corporation shall be:	2011 OCT 25 PM 2: 0
ARTICLE II	PRINCIPAL OFFICE	2011 001 25 111 2-1
	Principal street address	Mailing address, if different is:
	4651 N. Federal Highway	
	Boca Raton, FL 33431-5133	
	<del></del>	
ARTICLE III	PURPOSE	
	which the corporation is organized is:	
to hold, imp	prove, develop, lease, manage, finance	e, mortgage and sell Lots 63 E and 81 F Unit 3,
Phase III lo	cated in Homestead in Wears Valley s	ubdivision, Sevier County, Tennessee.
	a.	
	r	
	}; 	
ARTICLE IV		
The number of s	hares of stock is: 1,000 shares of .001 par v	value common stock
ADTICI E U	INITIAL OFFICERS AND/OR DIRECTO	DG .
Name and	Title: Carl Schoennl PTSD	Name and Title:
Address:	4651 N. Federal Highway	Address:
	Boca Raton, FL 33431-5133	
		*
Nama and	Title	Name and Title:
Address:	Title:	Address
Addiess.		Address:
_		
	Title:	Name and Title:
Address:		
	·	
	REGISTERED AGENT	
	Torida street address (P.O. Box NOT acceptable)	
Name: Address:	W. Rodgers Moore, P.A.	
Address;	1900 Glades Rd., Suite 401 Boca Raton, FL 33431	
	Ibuca Raturi, Fr 3343.	<del></del>
ARTICLE VII	INCORPORATOR	
	ddress of the Incorporator is:	
Name:	W. Rodgers Moore, P.A.	_
Address:	1900 Glades Rd., Sutie 401	_
	Boca Raton, FL 33431	<del>-</del>
Having been na	med as registered agent to accept service of proce	ss for the above stated corporation at the place designated in
	am familiar with and accept the appointment as re	
		1 .
		(0/24/2011)
	Required Signature/Registered Agent	/ Date
I cahaala dala da	comment and affirm that the facts at the land	a true I am muora that the foles information autuality !
	cument and affirm that the facts stated herein ar Department of State constitutes a third degree feloi	e true. I am aware that the false information submitted in a
avennem w me	topariplem of State Constitutes a unita degree Jelon	y as province for in soft (155) task
		10/21/2011 Date
	Required Signature/Incorporator	Date