

P12000008996

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

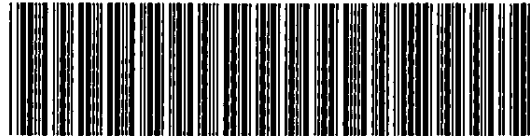
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
12 JAN 25 PM 1:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

VH

**COVER LETTER**

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

**SUBJECT: Maxx Beverages, Inc.**

(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: Sol Beatriz Sanchez

Name (Printed or typed)

7305 SW 42 Terrace

Address

Miami, Florida 33155

City, State & Zip

305 264-1106

Daytime Telephone number

solsanchez@bellsouth.net

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** Maxx Beverages, Inc  
The name of the corporation shall be:

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**ARTICLE II PRINCIPAL OFFICE**  
Principal street address  
7305 SW 42 Terrace  
Miami, Florida 33155

12 JAN 25 PM 1:27  
Mailing address, if different is:

SAME AS PRINCIPAL ADDRESS  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is:  
The sale and distribution of beverages

**ARTICLE IV SHARES**  
The number of shares of stock is: 100

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

Name and Title: <u>Joseph Homolya - President</u>	Name and Title: <u>Sol Beatriz Sanchez - VP</u>
Address: <u>Cermelska 67c</u>	Address: <u>7305 SW 42 Terrace</u>
<u>04001 KOSICE</u>	
<u>Slovakia</u>	<u>Miami, Florida 33155</u>

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

**ARTICLE VI REGISTERED AGENT**

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

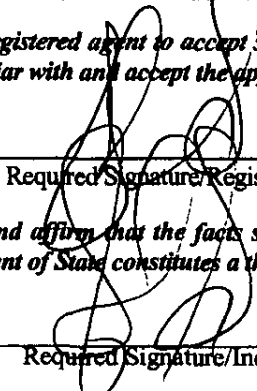
Name: Sol Beatriz Sanchez  
Address: 7305 SW 42 Terrace  
Miami, Florida 33155

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Sol Beatriz Sanchez  
Address: 7305 SW 42 Terrace  
Miami, Florida 33155

*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

01/23/2012

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

01/23/2012

Date