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SECRETARY OF STATE

Maylia

COVER LETTER

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

SUBJECT: MAXTEK SOLUTIONS	i, INC.
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM: MIKSIM ZERNITSKIY	
6680 47TH STREET NO	(Printed or typed) RTH Address
PINELLAS PARK, FL 3	
(412)6.00 - 066 Daytime To	/ elephone number
MAXTEKSOLUTIONS@	

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)

ADTOLD IT	DDINGIDAL OFFICE		
ARTICLE II	PRINCIPAL OFFICE Principal street address	Mail	ing address, if different is:
66	580 47TH STREET NORTH	TVIAII	ing address, if different is.
	- 	** - ** - *	
	NELLAS PARK, FL 33781		· · · · · · · · · · · · · · · · · · ·
ARTICLE III F	TIPPOSE		
	ich the corporation is organized is:		\$ 5 5 7
	SALES AND SERVICE		RING 31 PAIR TO THE SECRETARY OF STATE
ADTICLE IN	Cuadde		75 75
The number of share	SHARES s of stock is:100		第二 5
	INITIAL OFFICERS AND/OR DIRECTOR	18	Du le
Name and Titl	eMAKSIMZERNITSKIY, PRESIDENT	Nome and Title:	
Address:	6680 47TH STREET NORTH		
Addicss.	PINELLAS PARK, FL 33781		
	FINELLAS PARK, FL 33/61		
Name and Titl	e:	Name and Title	
Address:		_ Name and Title	*- 1 THAMES
Address.			
			
Name and Titl	e:	Name and Title	
Address:	·	_ Name and The	
7 Iddi 035.		_ Addi 033.	
		-	
ARTICLE VI R	REGISTERED AGENT		
	da street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name:	LARRY LIPNER	•	
Address:	1440 CORAL RIDGE DRIVE #17	2	
	CORAL SPRINGS, FL 33071	-	Þ
ARTICLE VII I	NCORPORATOR		•
The <u>name and addr</u>	ess of the Incorporator is:		
Name:	LARRY LIPNER	<u>-</u>	
Address:	1440 CORAL RIDGE DRIVE #172 CORAL SPRINGS, FL 33071	<u>.</u>	
Having been named his certificate, I am	as registered agent to accept service of process familiar with and accept the appointment as reg	s for the above stated c istered agent and agree	corporation at the place designated in to act in this capacity
	9		8/24/2012
	Required Signature/Registered Agent	· · · · · · · · · · · · · · · · · · ·	Date
submit this docum	ent and affirm that the facts stated herein are	toria I muo muona iliai	the folse information submitted in
locument to the Dep	artment of State constitutes a third degree felon	oes provided for in s.Ri	ine juise injormuuon suomuuea in a 17.155. F.S.
			···
			8/24/2012
	Required Signature/Incorporator		Date