

P130000073172

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

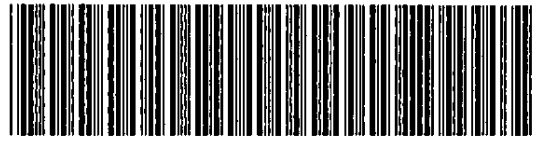
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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08/14/13--01009--012 **87.50

FILED
13 SEP -3 AM 10:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1113-46136 MD 9/6

COVER LETTER

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

SUBJECT: THE MAX GOODING COMPANY
(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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: FORREST MAXWELL GOODING
Name (Printed or typed)

4975 SANDRA BAY DRIVE, UNIT 105
Address

NAPLES, FL. 34109
City, State & Zip

239.249.4144
Daytime Telephone number

forrestmgooding@gmail.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 19, 2013

FORREST MAXWELL GOODING
4975 SANDRA BAY DRIVE, UNIT 105
NAPLES, FL 34109

SUBJECT: THE MAX GOODING COMPANY
Ref. Number: W13000046136

We have received your document for THE MAX GOODING COMPANY and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Maryanne Dickey
Regulatory Specialist II
New Filing Section

Letter Number: 313A00019775

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: THE MAX GOODING COMPANY

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4975 SANDRA BAY DRIVE, UNIT 105
NAPLES, FL. 34109

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TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: FINE & COMMERCIAL ART & DESIGN, LANDSCAPE DESIGN, DESIGN CONSULTING, ARTISTIC CONSULTING, DRAFTING, GRAPHIC DESIGN, ART & CREATIVE DIRECTION, CREATIVE CONSULTING

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: FORREST MAXWELL GOODING (PRESIDENT)
Address: 4975 SANDRA BAY DRIVE UNIT 105 NAPLES, FL. 34109
Name and Title: FORREST MAXWELL GOODING (V.P.)
Address: 4975 SANDRA BAY DRIVE UNIT 105 NAPLES, FL. 34109

Name and Title: FORREST MAXWELL GOODING (SECRETARY)
Address: 4975 SANDRA BAY DRIVE UNIT 105 NAPLES, FL. 34109
Name and Title: FORREST MAXWELL GOODING (TREASURER)
Address: 4975 SANDRA BAY DRIVE UNIT 105 NAPLES, FL. 34109

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

(cont.)

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: FORREST MAXWELL GOODING
 Address: 4975 SANDRA BAY DRIVE, UNIT 105
NAPLES, FL. 34109

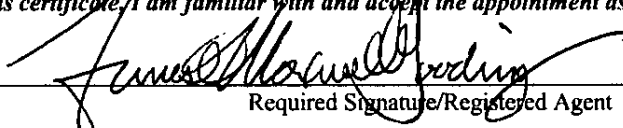
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ARTICLE VII INCORPORATOR

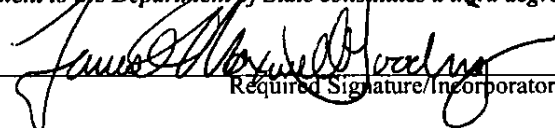
The **name and address** of the Incorporator is:

Name: FORREST MAXWELL GOODING
 Address: 4975 SANDRA BAY DRIVE, UNIT 105
NAPLES, FL. 34109

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 8/28/2013 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 8/28/2013 Date