## P13000089944

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)	·		
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL.		
(Bu	siness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
	,			

Office Use Only



000253134950

11/01/13--01006--005 \*\*78.75

IS NOV -1 PM 1: 02
SECRETARY OF STATE
VALUATION OF STATE

W 11/2

## **COVER LETTER**

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

SUBJECT:	Maxime,	Inc.			
	(PROPOSED CORPORA	ΓΕ NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	d 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: Tracy Niedermeyer Name (Printed or typed)					
	Miami, F	1000000000000000000000000000000000000	1 <u>e                                    </u>		
	772 9 Daytime Te	13 5714 elephone number			
<u>+</u>	racynieder E-mail address: (to be used	Meyer @ C for future annual report	mail com		

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 The name of the corporation shall be: ARTICLE II PRINCIPAL OFFICE Principal street address Mailing address, if different is: **PURPOSE** ARTICLE IV The number of shares of stock is: Name and Title: Address Name and Title: Name and Title: Address \_\_\_\_\_ Address: 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:	
Address: 3714 Mat	dermeyer heson Ave	NOV -1 F
Miami, FL ARTICLE VII INCORPORATOR	<u>35 35</u>	ED PH 1:02 Of State E. Florida
The name and address of the Incorporator is:  Name:  Address:  Address:  Miami, F	cdermeyer theson Ave L 33133	
this certificate, I am familiar with and accept the	ot service of process for the above stated corporal appointment as registered agent and agree to accept the service of the ser	
I submit this document and affirm that the fact	egistered Afent ts stated herein are true. I am aware that the fal a third degree felony as provided for in s.817.155	
Gracy Midery Required Signature	Incorporator	10/30/2013
Article VIII : An	effective date y 1,2014	
Lacy	Nieder meger 1 registered agent	0/30/2013
Tracy		/30/2013