

P15000028783

Florida Department of State
Division of Corporations
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
ROMAX INTERNATIONAL INVESTMENTS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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TALLAHASSEE, FLORIDA

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March 25, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORP USA

SUBJECT: ROMAX INTERNATIONAL INVESTMENTS, INC.
REF: W15000020617

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please list "MAX ROMANO" if that is the first and last name for Articles V-VII.

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

Valerie Herring
Regulatory Specialist II
New Filing Section

FAX Aud. #: H15000074223
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P.O BOX 6327 - Tallahassee, Florida 32314

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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: ROMAX INTERNATIONAL INVESTMENTS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

17001 Collins Ave., #1203
Sunny Isles, FL 33160

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To purchase, own, manage and
sell real property

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Max Romano PST Name and Title: _____

Address 17001 Collins Ave. Address: _____
#1203
Sunny Isles, FL 33160

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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(cont.)

15 MAR 26 PM 12: 22

Name and Title: _____ Name and Title: SECRETARY OF STATE
TALLAHASSEE, FLORIDA
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Max Romano
Address: 17001 Collins Ave #1203
Sunny Isles, FL 33160

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Max Romano
Address: 17001 Collins Ave #1203
Sunny Isles, FL 33160

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.

✓ [Signature]
Required Signature/Registered Agent

March 24th, 2015
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.817.05, F.S.

✓ [Signature]
Required Signature/Incorporator

March 24th, 2015
Date

415000074223