Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

Phone Fax Number

: (305)552-5973 : (305)675-5944

\*\*Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

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## FLORIDA PROFIT/NON PROFIT CORPORATION **MAXDETERG CORP**

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

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## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

MAXDETELG CORP
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
35-77 SW 13 TEXR 35 7
MiAmi FL 33145
ARTICLE III SHARES: The number of shares of stock is:
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
ORFED HERNANDEZ VIERA
DIANA GRISELLA SOLIS HUERON (VP)
ADTICLE W. INDUAL DECICEDED ACCEM AND CODECE ADDRESS.
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:  The name and Florida street address (PO Box not acceptable) of the registered agent is:
Orfeo Hernandez Viera
3577 SW 13 Terr
Miami FL 33145
*
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
Orfeo Hernandez Viera
3577 SW 13 Terr
Miami FL 33N5

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## Required Signatures:

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

ered Agent

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.

Date

17 APR -4 PM 12: 21