Division of Corporations Electronic Filing Cover Sheet

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	Division of Cor	porations
	Fax Number	: (850)617-6381
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		s for this business entity to be used for future ngs. Enter only one email address please.**

FLORIDA PROFIT/NON PROFIT CORPORATION LIMPIAMAX, CORP

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is: mpiamax ARTICLE II PRINCIPAL OFFICE: The principal street address and mailing address is: 5W ARTICLE III SHARES: The number of shares of stock is: (OS ARTICLE IV INITIAL DIRECTORS AND/OR OFFICEIS: ERMANDEZ ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is: HERMANDEZ **INCORPORATOR:** The name and address of the Incorporator is: Hernandez 83 Due Misk

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

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.

Incorporator