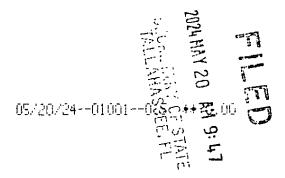
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(R	equestor's Name)			
(Address)				
(A	ddress)			
(C	ity/State/Zip/Phone a	#)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates o	of Status		
Special Instructions to Filing Officer:				

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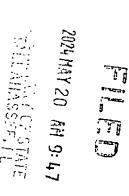
024 MAY 20 AM 8: 02 ECRETARY OF STATE

COVER LETTER

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

SUBJECT:			
	(PROPOSED CORPORA	TE NAME - <u>MUST INCLU</u>	DE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation ar	nd a check for:
□ \$70.00	□ \$78.75	□ \$78.75	□ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate of
			Status
		ADDITIONAL CO	PY REQUIRED
<u>129</u>	040 GROVEHURST AVE A NTER GARDEN, FL 34787	(Printed or typed) Address State & Zip	
<u>321</u>	-689-8371 Daytime To	elephone number	
dan	d689@gmail.com E-mail address: (to be used	for future annual report no	otification)

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 NAME

MAXX

The name of the corporation shall be: MAD CONCRETE	INC
ARTICLE II PRINCIPAL OFFICE	
Principal <u>street</u> address 6731 EDGEWATER DR ORLANDO FL 32810	
<u>ARTICLE III PURPOSE</u>	
The purpose for which the corporation is organized is: <u>CON</u>	CRETE PRODUCTS
ARTICLE IV SHARES	
The number of shares of stock is: 100	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
Name and Title: <u>DHANESHWAR DEONARINE</u>	Name and Title: PRESIDENT
Address 12940 GROVEHURST AVE	
WINTER GARDEN, FL 34787	Address:
Name and Title:	Name and Title:
Address	Address:
<u> </u>	
Name and Title:	Name and Title:
	Traine and Title.
Address	Address:
	

. Nam	e and Title:	Name and Title:
Addre	ss	Address:
		_
		_
ARTICLE VI K	REGISTERED AGENT	
The <u>name</u> and	Florida street address (P.O. Box NOT acceptable)	of the registered agent is:
Name:	DHANESHWAR DEONARINE	
Address:	12940 GROVEHURST AVE	
	WINTER GARDEN, FL 34787	_
ARTICLE VII	INCORPORATOR	
The <u>name</u> and	address of the Incorporator is:	
Name:	DHANESHWAR DEONARINE	_
Address:	12940 GROVEHURST AVE	_
	WINTER GARDEN, FL 34787	-
	EFFECTIVE DATE: f other than the date of filing:	(OPTIONAL)
(If an effective	date is listed, the date must be specific and canno	t be more than five days prior or 90 days after the filing.)
Note: If the date document's effe	e inserted in this block does not meet the applicable sective date on the Department of State's records.	statutory filing requirements, this date will not be listed as the
Having been na this certificate,	med as registered agent to accept service of proces I am familiar with and accept the appointment as i	s for the above stated corporation at the place designated in egistered agent and agree to act in this capacity
	A. Dun	75 /
	Required Signature/Registered Agent	S / 20 / 24/ Date
l submit this do document to th	cument and affirm that the facts stated herein are e Department of State constitutes a th ird degree fo	true. I am aware that the false information submitted in a clony as providedfor in s. 817.155, F. S.
Required Signal	ture/incorporator	Date 5/20/24
Ŧ	Please add EIN # 0	99-3078742