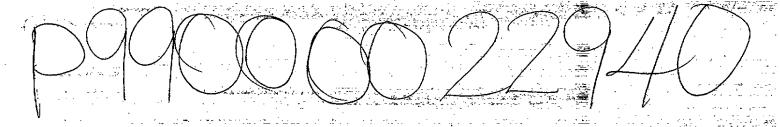
# Peter J Tremblay Bookkeeping Unlimited

Post Office Box 1177 Boynton Beach, FL 33425

(561)966-9288



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

Subject: Secure Max, Inc.

Enclosed is an original and one (1) copy of the articles of incorporation for Secure Max, Inc. along with a check in the amount of \$122.50

When completed please return to:

Peter Tremblay
P.O. Box 1177
Boynton Beach, FL 33425-1177

Thanking you in advance.

Sincerely,

Peter Tremblay

99 MAR - 8 AH IO 21
SEUNCIARY OF STATE
TALLAHASSEE FLORIDA



### ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Secure Max, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

2115 10th Avenue North Lake Worth, FL 33461

mailing P.O. Box 1177 Boynton Beach, FL 33425-1177

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 shares of common stock, of \$1.00 par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Jeffrey Berkoff

2115 10th Avenue North Lake Worth, FL 33461

#### ARTICLE V INCORPORATOR(S)

## See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Jeffrey Berkoff

2115 10th Avenue North Lake Worth, FL 33461

The unc	dersigned in	ncorporator(s) has(	have) executed these Articles of	incorporation this
1st	_ day of _	March	, 19 <b>99</b> .	
(An add	itional artic	ele must be added i	f an effective date is requested.)	
	_		4/1/14	<i>]</i>
		. 0	Signature	- 
	-		Signature	
	-		Signature	

### Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is:	Secure Max, Inc.	
2.	The name and address of the regist	ered agent and office is:	99 HAR
	Jeffre	ey Berkoff	-8
		(NAME)	元言う
	2115	10th Avenue North	F1.00 2
	(P.O. Box	or Mail Drop Box NOT ACCEPTABLE)	
	Lake	Worth, FL 33461	,
		(City/State/Zip)	

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

3-2-99 (SIGNATURE) (DATE)