P99000009350

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

UBJECT:	Main Street Capital Corporation (Proposed corporate name - must include suffix)			
			10002946216 -07/30/9901081008 *****70.00 ******70.0	
nclosed is an orig	ginal and one(1) copy of the artic	les of incorporation and a c	CHECK IOI.	
☐ \$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO	PY REQUIRED	
FROM	A: Allan Beraquit Name (Printed or typed)		
	4239 Perry Place	Address		
	New Port Richey, FL	34652	-t., 0	
City, State & Zip		9 JUI		
	(727) 842-4591 HCT ASS		99 JUL 30 SECRETAR SECRETAR	
	Daytime	Telephone number	NH 7:58 SEE FLORIDA	

NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION

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

ARTICLE I	NAME
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The name of the corporation shall be:

Main Street Capital Corporation

ARTICLE II PRINCIPAL OFFICE

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

4239 Perry Place

New Port Richey, FL 34652

ARTICLE III SHARES

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

100 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Allan Beraquit

4239 Perry Place

New Port Richey, FL 34652

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Allan Beraquit

4239 Perry Place

New Port Richey, FL 34652

Signature/Incorporator

7-23-99

Date

99 JIL 30 JII 7:58

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, Thereby 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

7-23-99
Signature/Registered Agent
Date