

PO4000135725

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

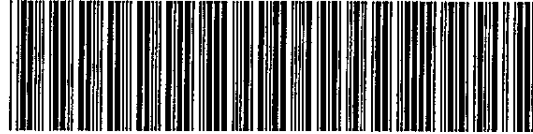
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

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04 SEP 29 AM 11:12

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

mc 9/29

## TRANSMITTAL LETTER

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

SUBJECT: Amado Mederos, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: Amado Mederos  
Name (Printed or typed)

800 West Avenue #440  
Address

Miami Beach, FL 33139  
City, State & Zip

305-992-7858  
Daytime Telephone number

**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)

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**ARTICLE I NAME**

The name of the corporation shall be:

Amado Mederos, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

800 West Avenue, Apt 440, Miami Beach, FL 33139

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

S-corporation - Business

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Amado Mederos, President, Treasurer

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

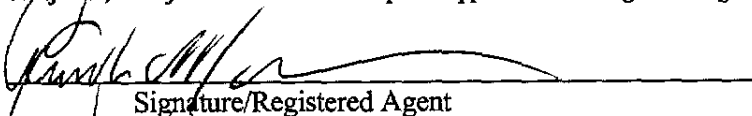
Amado Mederos  
800 West Ave, #440  
Miami Beach, FL 33139

**ARTICLE VII INCORPORATOR**

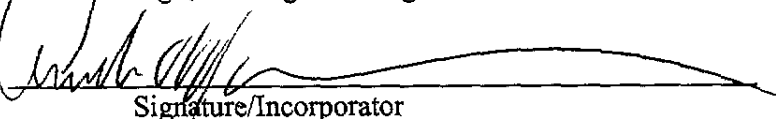
The name and address of the Incorporator is:

Amado Mederos  
800 West Ave, #440  
Miami Beach, FL 33139

\*\*\*\*\*  
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

  
Signature/Registered Agent

9/23/04  
Date

  
Signature/Incorporator

9/23/04  
Date