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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SC  
6-15-11

**COVER LETTER**

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

**SUBJECT: Academic Merchandise Partners Co.**  
**(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: Jorge J. Hernandez**  
Name (Printed or typed)

**8778 NW 169th terrace**  
Address

**Miami Lakes, Florida 33018**  
City, State & Zip

**786-237-5674**  
Daytime Telephone number

**Jorge.ampartners@gmail.com**  
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FL 32314  
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**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** Academic Merchandise Partners Co.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address: 8778 NW 169th terrace  
Miami Lakes, FL 33018  
Mailing address, if different is: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is:  
To sell different products including software and hardware to the Educational Market

**ARTICLE IV SHARES**  
The number of shares of stock is: 100

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

Name and Title: <u>Jorge J. Hernandez, President</u>	Name and Title: _____
Address: <u>8778 NW 169th terrace</u>	Address: _____
<u>Miami Lakes, FL 33018</u>	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

**ARTICLE VI REGISTERED AGENT**  
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  
Name: Jorge J. Hernandez  
Address: 8778 NW 169th terrace  
Miami Lakes, FL 33018

**ARTICLE VII INCORPORATOR**  
The name and address of the Incorporator is:  
Name: Jorge J. Hernandez  
Address: 8778 NW 169th terrace  
Miami Lakes, FL 33018

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TALLAHASSEE, FLORIDA  
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*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*

Jorge Hernandez Required Signature/Registered Agent 6-3-11 Date

*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.*

Jorge Hernandez Required Signature/Incorporator 6-3-11 Date