

F18000002007

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

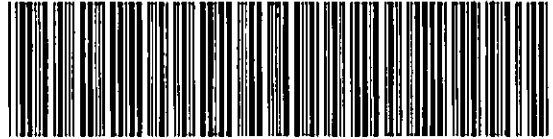
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W18-27607

Office Use Only



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03/19/18--01030--007 **78.75

2018 APR 30 AM 8:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

2/1/18



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 21, 2018

NORMA E ARVELO
PO BOX 669371
MIAMI, FL 33166

SUBJECT: AMERICAN NETWORK MEDIA INC.
Ref. Number: W18000027607

We have received your document for AMERICAN NETWORK MEDIA INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The registered agent must sign accepting the designation.

The document must include the purpose(s) for which the corporation is authorized in the home state or country to be carried out in the state of Florida. Please make such correction to number 8 of the application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 718A00005720

RECEIVED

2018 APR 30 PM 2:43

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32314

www.sunbiz.org

Division of Corporations - P.O. BOX 6327, Tallahassee, Florida 32314

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AMERICAN NETWORK MEDIA, INC.
Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

NORMA E ARVELO
Name of Person

AMERICAN NETWORK MEDIA INC.
Firm/Company

P.O. Box 669371
Address

Miami, FL 33166
City/State and Zip

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

For further information concerning this matter, please call:

Paul Kost at (786) 277-0572
Name of Person Area Code Daytime Telephone Number

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☒ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO
CONDUCT ITS AFFAIRS IN FLORIDA**

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA:

1. AMERICAN NETWORK MEDIA, INC.

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. State of Delaware

(State or country under the law of which it is incorporated)

3. _____

(FEI number, if applicable)

4. 11-12-2013

(Date of Incorporation)

5. Perpetual

(Date of duration, if other than perpetual)

6. _____

(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to determine penalty liability.)

7. 2100 W 76th St, Suite #410, Hialeah, FL 33016

(Principal office address)

P.O. Box 669371, Miami, FL 33166

(Current mailing address, if different)

8. Spread and promote family values

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: Paul Kost

Office Address: 3710 Estepona Ave.

Doral

(City)

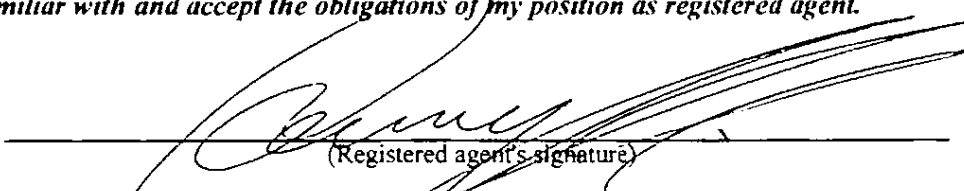
Florida

33178

(Zip Code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

2018 APR 30 AM 8:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

12. Names and addresses of officers and/or directors

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: NORMA E ARVELO

Address: 1334 SW 6th St, Apt. #11, Miami, FL
33135

Director: _____

Address: _____

B. OFFICERS

President: DENYS VALENZUELA

Address: 330 SW 95 Terrace, Pembroke Pines
FL 33025

Vice President: NORMA E ARVELO

Address: 1334 SW 6th St, Apt. #11, Miami, FL
33135

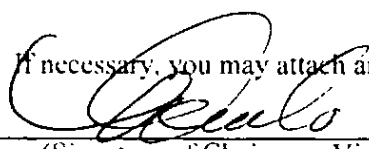
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Norma E Arvelo, Vice President
(Typed or printed name and capacity of person submitting application)

FILED
2018 APR 30 AM 8:40
CLERK OF DISTRICT COURT
TALLAHASSEE, FL 32302

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "AMERICAN NETWORK MEDIA, INC." IS DULY
INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS
OF THIS OFFICE SHOW, AS OF THE TWELFTH DAY OF FEBRUARY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION
IS AN EXEMPT CORPORATION.



5431275 8300C

SR# 20180680599

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202133873

Date: 02-12-18