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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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mc

## COVER LETTER

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

SUBJECT: AMIGOS UNIDOS CON TAMPICO INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

ADDITIONAL COPY REQUIRED

FROM: IVETTE CARDELLI  
Name (Printed or typed)

6919 Broward BLVD - STE 154  
Address

Plantation FLA 33317  
City, State & Zip

954 261 5759  
Daytime Telephone number

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

**ARTICLES OF INCORPORATION**  
In Compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

*Amigos Unidos Con Tampico, INC*

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

*6919 Broward Blvd - STE 154, Plantation, FL 33317*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

*Non For Profit Fund Raising for Tampico Mexico  
Health Clinics*

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

*Appointed By President*

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

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

*Pres. IVETTE CARDELLI, 6919 Broward Blvd - STE 154, Plantation, FL 33317*

*VP. JOSANA CARDELLI, 6919 Broward Blvd - STE 154, Plantation, FL*

*Sec. DINO CARDELLI, 6919 Broward Blvd - STE 154, Plantation, FL 33317*

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

*6919 Broward Blvd - STE 154, Plantation, FL 33317  
Ivette Cardelli*

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

*IVETTE CARDELLI*

*6919 Broward Blvd - STE 154, Plantation, FL 33317*

\*\*\*\*\*  
*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.*

*X Ivette Cardelli*  
Signature/Registered Agent *IVETTE CARDELLI*

*09.23.08*  
Date

*X Ivette Cardelli*  
Signature/Incorporator *IVETTE CARDELLI*

*09.23.08*  
Date

2008 GCF - 1 A II: 09  
SECRETARY OF STATE  
FALL RIVER, MASSACHUSETTS  
FILED