

N09000002701

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

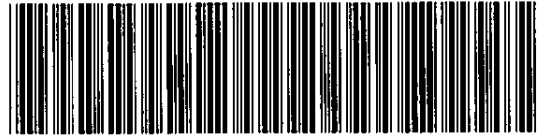
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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03/02/09--01024--008 \*\*87.50

AND  
FILED  
09 MAR 16 PM 3:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1009-10294

## COVER LETTER

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

**SUBJECT:** Intermana Corp.

(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:** Melvin Rivera

Name (Printed or typed)

1491 NW 159th Ave

Address

Pembroke Pines, FL 33028

City, State & Zip

954-918-3320

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 4, 2009

MELVIN RIVERA  
1491 NW 159TH AVE  
PEMBROKE PINES, FL 33028

SUBJECT: INTERMANA CORP.  
Ref. Number: W09000010294

We have received your document for INTERMANA CORP. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the corporation's principal street address and/or a mailing address in the document. A post office box is not acceptable for the principal address.

Please return the corrected original and one copy of 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) 245-6962.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 909A00007492

APPROVED  
AND  
FILED

**ARTICLES OF INCORPORATION** 09 MAR 16 PM 3:44  
In Compliance with Chapter 617, F.S., (Not for Profit)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

Intermana Corp.

**ARTICLE II PRINCIPAL OFFICE**

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

1491 NW 159th Ave  
Pembroke Pines, FL 33028

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To promote the educational, social, and spiritual development of the Hispanics in the world through the internet.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

The directors are appointed by a nomination and vote.

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

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

Melvin Rivera  
1491 NW 159th Ave Pembroke Pines, FL 33028  
President, Treasurer, Secretary

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

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


Arimel Rivera  
21011 Johnson St Suite 110 Pembroke Pines, FL 33029

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

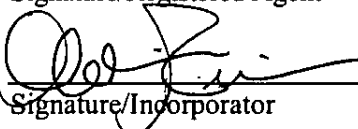
Melvin Rivera  
1491 NW 159th Ave Pembroke Pines, FL 33028

\*\*\*\*\*  
*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

02/27/2009

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

02/27/2009

\_\_\_\_\_  
Date