

NI 3000008936

(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:

Antonio Medina GAVE

**AUTHORIZATION BY PHONE TO**

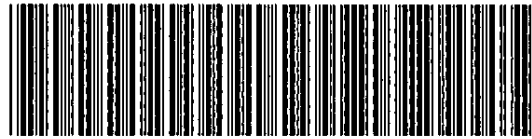
**CORRECT** TV

**DATE** 10/2/13

**DOC. EXAM** VH

W13-52248

Office Use Only



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09/16/13--01020--014 \*\*78.75

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2013 SEP 30 PM 4:02

1/14

## COVER LETTER

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

SUBJECT: Payasa Peluza y Payaso Panky 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: Antonio Medina  
Name (Printed or typed)

431 Bay leaf Dr.  
Address

Kissimmee, FL 34759  
City, State & Zip

863-514-9868  
Daytime Telephone number

peluza123@live.com  
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 19, 2013

ANTONIO MEDINA  
431 BAY LEAF DR.  
KISSIMMEE, FL 34759

SUBJECT: PAYASA PELUZA Y PAYASO PANKY INC.  
Ref. Number: W13000052248

We have received your document for PAYASA PELUZA Y PAYASO PANKY 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):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

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) 245-6052.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 413A00022120

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

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DIVISION OF CORPORATION  
2013 SEP 30 PM 4:02

**ARTICLE I NAME**

The name of the corporation shall be: Payasa Peluza y Payaso Panky Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

431 Bay leaf Dr.

Kissimmee Fl 34759

Mailing address, if different is:

431 Bay leaf Dr.

Kissimmee, Fl 34759

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Ministration , help and support for voluntary and community children in need.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed:

"Bylaws"

*Assigned directly  
Signed [Signature]  
AMZ  
w/only  
entry  
09/27/13*

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

Name and Title: Antonio Medina/ Director

Address: 431 Bay leaf Dr.

Kissimmee, Fl 34759

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: Carmen Maldonado/ Sub- Director

Address: 431 Bay leaf Dr

Kissimmee, Fl 34759

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: Edna Sanchez/ Secretary

Address: Calle arecife # 27

Manati, PR 00674

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

2013 SEP 30 PM 4:02

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: \_\_\_\_\_

Address: \_\_\_\_\_

Antonio Medina  
431 Bay leaf Dr.  
Kissimmee, FL 34759

**ARTICLE VII INCORPORATOR**

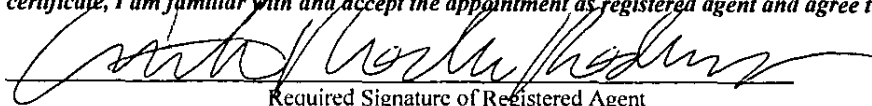
The name and address of the Incorporator is:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Antonio Medina  
431 Bay leaf Dr.  
Kissimmee, fl 34759

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

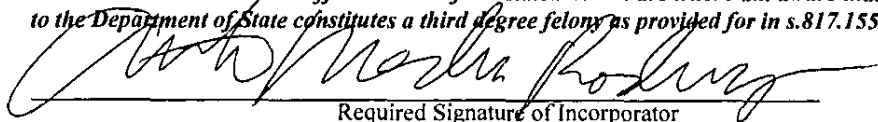


Required Signature of Registered Agent

09/11/2013

Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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.



Required Signature of Incorporator

09/11/2013

Date