P0/800013468

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

SUBJECT: A	rmenco, Incorporated (PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u> Į	DE SUFFIX)	OF SCALE
Enclosed is an origina	al and one(1) convert the extical			
\$70.00 Filing Fee	al and one(1) copy of the article \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:	Armen Pacifico Name (Pr	inted or typed)		. ;
	11140 Heron Bay B	ddress	 10003634;	2108
	Coral Springs, FL City, S 954-560-6611	33076 State & Zip	-02/05/010: ******70.00	1157008 ******70.00
Daytime Telephone number				

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

The name of the corporation shall be:

Armenco, Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

11140 Heron Bay Blvd. -Apt 215

Coral Springs, FL 33076 <u>ARTICLE III PURPOSE</u>

The purpose for which the corporation is organized is:

restaurant/lounge

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS DIRECTORS (optional)

The name(s) and address(es):

Armen Pacifico

11140 Heron Bay Blvd. Apt 215

Coral Springs, FL 33076

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Armen Pacifico

11140 Heron Bay blvd. Apt 215

Coral Springs, FL 33076 <u>ARTICLE VII INCORPORATOR</u>

The name and address of the Incorporator is:

Armen Pacifico

11140 Heron Bay Blvd. Apt 215

Coral Springs, FL 33076

certificate, Lam familiar with and accept the appointment as registered agent and agree to act in this capacity

Date

a. /= . /

Date

Signature/Registered Agent

Signature/Incorporator